

OFFER REQUEST FORM (to photocopy)

Company name: _____

Address: _____

Postcode: _____ City: _____ County/State: _____

Tel: _____ Fax: _____

E-mail: _____

Contact name: _____

VAT number: _____

Quantity	Code	Description	Price per unit	Total Price
			€	€
			€	€
			€	€
			€	€
			€	€
			€	€
			€	€
			€	€
			€	€
			€	€
			€	€
			€	€
			€	€
			€	€
			€	€
			€	€
			€	€
			€	€
			€	€
			€	€

<i>Total order price</i>	€	
<i>Shipment, standard packaging cost</i>	€	
<i>Discount agreed</i>	€	
<i>Net order price</i>	€	+ VAT

NOTE:

All prices are excluding VAT
Minimum order € 100.00 +VAT

We will return this form complete with the prices you require