



Insulation Supply Co.

1901 Harpers Way
Torrance, CA 90501

Phone: (310) 320-9400 FAX: (310) 533-0783

Date: _____

Fax #: _____

To: _____

Attn: _____

Notes: _____

Acct #: _____

SUPPLIER REQUEST FOR QUOTE

ITEM	DESCRIPTION	QUANTITY	UNIT OF MEASURE	NET UNIT PRICE	DELIVERY
1					
2					
3					
4					
5					
6					

TERMS _____ MINIMUM _____

F.O.B. _____ PRICES ARE FIRM FOR _____ DAYS

By: _____ Title: _____

Instructions for Completing "Supplier Request Form Quote Form", SF-02

1. Write the current date
2. Write the fax number
3. Write supplier name
4. Write the name of contact person
5. Write notes if any
6. Write Inesco's account number if accessible
7. Write the description of part number to be quoted
8. Write the quantity, unit of measure, unit of price and delivery time
9. Fill out the bottom part of form with the correct information
10. Sign the form and put your title