

Bid To: Address:

CITY:

Phone:

*** TO ENSURE Q

UICK	AND ACCU	RATE QUOT	E PLEASE A	ANSWER ALL Q	UESTIONS	S ***		(
			DATE:						
	Contact:			Job Name:					
				Ship to City:			State:	Zip:	
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	State:	Zip:		Project spec	s exsist:	Gerkii	n Window	s specified	
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	I ax / Liv	iaii.		bid as a voluntary alternate.					
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Project start date:		Requested Number			Building type:	Number of stories:			
Project finish date:		of Deliveries:			5 7.				
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Nail Fin:		Subframe	Needed:	Panning N	leeded:				
Additional Acc	essori	es:							
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** If windows need	l to be q	uoted per pro	ject specs plo	ease include o	сору **	box screen separate			
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** If windows need	to be qu			Box Screen Seperate					
			ndows & D	oors	Rhino (Quote Sheet PAGE	OF		
(nir)		P.O Box 3		4400					
\W /		Sioux City	/ IA. 5′	1102					



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