REQUEST FOR QUOTE

			I	Date:	
Order for Resale?					
Company	/ Name:				
Contact Name:				Phone Number:	
ax or E-1	mail quote to:				
Qty	Angleworm Model	Packing Type 1 (standard) 2 (extra \$)	Reach (Inches)	Qty	Item
_					Replacement Cutter for 3400 Series
					Replacement Cutter for 2500 Series
					Replacement Packing for 1550 Series Type 1 Type 2
					Replacement Packing for 2500 Series Type 1 Type 2
					Replacement Packing for 3400 Series Type 1 Type 2
					Replacement Packing for 4550 Series Type 1 Type 2
					1
otes or Q	uestions:				