

Logistics Service Quotation

Company Information

Company Name

Enter your company name

Date

Address

Enter address

Contact Person

Name

Phone

Phone number

Email

Email address

Client Information

Client Name

Client's name

Client Company

Company

Address

Address

Phone

Phone

Email

Email

Quotation Details

Quotation Number

e.g. QUO-2024-XYZ

Validity

e.g. 30 days

Service Description

Describe services to be provided

Service Charges

Service	Unit	Quantity	Rate	Total
<input type="text" value="e.g. Freight Trans"/>	<input type="text" value="e.g. Per Trip"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Subtotal				<input type="text"/>
Tax (%)				<input type="text"/>
Grand Total				<input type="text"/>

Terms & Conditions

Specify terms and conditions here

Authorized Signature

Name

Date

Position