

# Document Printing Quotation

Quotation No.: \_\_\_\_\_

Date: \_\_\_\_\_

Customer Name: \_\_\_\_\_

Contact: \_\_\_\_\_

Company: \_\_\_\_\_

Email: \_\_\_\_\_

Address: \_\_\_\_\_

## Printing Details

Description	Size	Pages	Quantity	Unit Price	Total
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Subtotal: \_\_\_\_\_

Tax (\_\_\_\_ %): \_\_\_\_\_

Total Amount: \_\_\_\_\_

## Terms & Conditions

- Prices are valid for \_\_\_ days from the quotation date.
- Payment terms: \_\_\_\_\_.
- Delivery time: \_\_\_\_\_.
- Any changes may affect the quotation.

Authorized Signature

Name: \_\_\_\_\_

Designation: \_\_\_\_\_

Customer Signature

Name: \_\_\_\_\_

Date: \_\_\_\_\_