

# STANDARD QUOTATION & SPECIFICATION FORM

**VENDOR OF RECORD:**

**STATE CODE:**

1. STATE:	2. DATE SUBMITTED:
3. BRAND NAME:	4. EFFECTIVE DATE:
5. STATE STOCK: <input type="checkbox"/>	6. BAILMENT: <input type="checkbox"/>
7. SPECIAL PURCHASE ORDER PLAN: <input type="checkbox"/>	
8. TYPE:	9. CLASS:
10. FORMULA:	
11. AGE/VINTAGE:	12. PROOF/ALCOHOL:
13. DOMESTIC:	
14. IMPORTED:	
15. DISTILLED/PROD.BY:	14a INBOND: <input type="checkbox"/> YES <input type="checkbox"/> NO
16. ADDRESS:	
17. BOTTLED BY:	
18. ADDRESS:	
19. SOLD UNDER ANY OTHER LABEL: <input type="checkbox"/> YES <input type="checkbox"/> NO	PROOF:      AGE:      EXPLAIN:
20. SHIP POINT:	21. FOB POINT:
	22. FRT. PER CWT:

**REASON FOR CHANGE:**

23. <input type="checkbox"/> AGE/VINTAGE/PROOF CHANGE	26. <input type="checkbox"/> CASE COST CHANGE	29. <input type="checkbox"/> PALLET/TIER/WEIGHT CHANGE
24. <input type="checkbox"/> SIZE CHANGE	27. <input type="checkbox"/> VENDOR CHANGE	30. <input type="checkbox"/> PACK CHANGE
25. <input type="checkbox"/> SCC/UPC CHANGE	28. <input type="checkbox"/> NEW ITEM	31. <input type="checkbox"/> OTHER (Explain on Line 54)

	OTHER	3 LITER/ 4 LITER	1.75 LT/ 1.5 LT	LITER	750 ML	375 ML/ 500 ML	200 ML/ 187 ML	50 ML/ 100 ML
32. UNIT PACK								
33. OUNCES PER BOTTLE								
34. BOTTLES / SLEEVE								
35. VENDOR # - UPC(CO. - 6 DIGIT)								
- UPC (BRAND - 6 DIGIT)								
36. 2ND VENDOR # - UPC (CO. - 6 DIGIT)								
- UPC (BRAND - 6 DIGIT)								
37. SHIP. CONT. CODE - SCC (first 8 digits)								
SHIP. CONT. CODE - SCC (last 6 digits)								
<b>38. STATE CODE</b>								
39. CASES / PALLET & CASES / LAYER								
40. CASE WEIGHT (LBS)								
41. NET COST FOB SHIP POINT								
42. U.S. FREIGHT								
43. OCEAN FREIGHT								
44. MARINE INSURANCE								
45. OTHER CHARGES / BAILMENT								
46. DISCOUNT OR INSERT NET								
<b>47. TOTAL INVOICE COST</b>								
48. CASE DIMENSIONS (L/W/H) (INCHES)								
49. BOTTLE DIMENSIONS (D/W/H)								
50. LAST/PREVIOUS QUOTED COST								
51. DATE LAST/PREVIOUS QUOTE								
52. CASE COST INCREASE/DECREASE								
53. COST PER SELLING UNIT								
54. REMARKS: (INDICATE MI ADA)								

55. Is this a product for which you want a limited listing period.  YES  NO      If yes the listing ends

**56. TERMS (NET/DISC.):**

<b>57. REPRESENTATIVE FOR THE STATE</b>	<b>58. WE CERTIFY THAT THE FOREGOING IS CORRECT</b>	
NAME:	SUPPLIER:	
ADDRESS:	STATE LIC/PERMIT NO:	
LIC NO:	FED. ID. NO.:	
TELEPHONE:	ADDRESS:	
FAX:	TELEPHONE:	FAX:
	BY:	
	TITLE:	

**STATE USE**