Copy must accompany order

SPECIAL PRICE INQUIRY

Valid for this requirement only

SPI Requested By: _____ Page 1 of _____ SPI # _____

District Manager: _____ Written by: _____ Date: _____

Sales Service Rep: _____ Date Price Required: _____ Bid Due: _____

Give Approximate List Value of Additional Products $ _____ Approximate Delv Req. _____ (Mo./Yr.)

Previous Order/SPI # _____

END USER / PROJECT:

Name:

City: St:

Zip:

Fax SPI back To:

SOLD TO: Distributor Other

Name:

City: State:

Zip: Phone:

ATTN:

E:Mail:

Product:

Explain Use:

Explain-Specs, Special Features, Gauges, Color Packing, Etc. - (Be Specific or Attach diagram)

Quantity Changes must be resubmitted and repriced!

Item	Quantity	Description	List Price	Approx. Weight

Custom touch-up must be requested at time of order

Color Extra: Net+ %

Custom Touch up (list) /4.5 oz. Aerosol /Gallon

Locker groupings are assumed and priced as 3 or more wide unless stated to the contrary. Add 10% for 2-wide groups and 20% for 1-wide. Starter and Adder pricing DOES NOT apply to SPI lockers.

Approved: Rejected: Date:

Reason Rejected:

Utah _____

NC _____

Both _____

FOB Points

File name: SPIformonexcelrev3-b

(Updated 8/7/07)

E-mail this form to SPI@PencoProducts.com or fax to 610-482-9442