

# Request For Quote

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

## Contact Information

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

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

Address 1: \_\_\_\_\_

Phone: \_\_\_\_\_

Address 2: \_\_\_\_\_

Fax: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

E-Mail: \_\_\_\_\_

## Mail Piece Specifications

Mailing Type:	Size:	Quantities:
<b>Postcard:</b>	<input type="checkbox"/> 4.25" x 6" <input type="checkbox"/> 5.5" x 8.5" <input type="checkbox"/> 6" x 9" <input type="checkbox"/> 6" x 11" <input type="checkbox"/> Other: H ____" x L ____"	_____
<b>Self Mailer:</b>	<input type="checkbox"/> 4.25" x 6" <input type="checkbox"/> 5.5" x 8.5" <input type="checkbox"/> 6" x 9" <input type="checkbox"/> 6" x 11" <input type="checkbox"/> Other: H ____" x L ____"	_____
<b>Booklets:</b>	<input type="checkbox"/> 5.5" x 8.5" <input type="checkbox"/> 6" x 9" <input type="checkbox"/> 8.5" x 11" <input type="checkbox"/> Other: H ____" x L ____"	_____
<b>Envelope:</b>	<input type="checkbox"/> #9 <input type="checkbox"/> #10 <input type="checkbox"/> 6" x 9" <input type="checkbox"/> 6.5" x 9.5" <input type="checkbox"/> Other: H ____" x L ____" <input type="checkbox"/> 9" x 12" <input type="checkbox"/> 10" x 13" <input type="checkbox"/> A2 <input type="checkbox"/> A3 <input type="checkbox"/> A4 <input type="checkbox"/> A5 <input type="checkbox"/> A6 <input type="checkbox"/> A7 <input type="checkbox"/> A8	_____
<b># of Inserts:</b>	_____	
<b>Match Mail:</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No    # Of Matches: _____	
<b>Saddle Stitched:</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Wafer Sealing:</b>	<input type="checkbox"/> Top <input type="checkbox"/> Bottom <input type="checkbox"/> Trailing Edge	

## Processing and Postage

<b>Mailing Class:</b>	<input type="checkbox"/> First-Class Presort <input type="checkbox"/> Presort Standard <input type="checkbox"/> Non Profit <input type="checkbox"/> Priority Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> International
<b>Postage Type:</b>	<input type="checkbox"/> Indicia Pre-Printed <input type="checkbox"/> Print Indicia <input type="checkbox"/> Live Stamp
<b>Post Office Delivery:</b>	<input type="checkbox"/> Palatine <input type="checkbox"/> Chicago <input type="checkbox"/> Carol Stream <input type="checkbox"/> Fox Valley <input type="checkbox"/> South Suburban <input type="checkbox"/> Other: _____
<b>Mail Tracking:</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No

## Additional Services

<b>Laser Imaging:</b>	<input type="checkbox"/> 8.5" x 11" <input type="checkbox"/> 8.5" x 14" <input type="checkbox"/> 11" x 17" <input type="checkbox"/> 12" x 18" <input type="checkbox"/> Other: H ____" x L ____"
<b>Folding:</b>	<input type="checkbox"/> Half-Fold <input type="checkbox"/> Tri-Fold <input type="checkbox"/> Right Angle <input type="checkbox"/> Other: _____
<b>Poly Bagging:</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No

## Other Information:

### Office Use Only:

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

Time: \_\_\_\_\_

Est #: \_\_\_\_\_