



Quotation Form

4 th Floor Mannan Plaza ,Khilkhet,Dhaka-1229

Date: 20-Apr-2021


SL No: 00009

## QUOTATION FORM

<b>Name Of Company:</b>	Arong
<b>Address:</b>	jkjkjk
<b>Pin Or Equivalent:</b>	6767554432

Kindly provide a quotation for the following goods:

Completed by HOR			To be Completed by supplier		
Description	Unit	Quantity	Unit Price	Discount	Net
test item1	gm	1			
test item2	kg	2			
test item3	pcs	5			

<b>For HOR:</b>	<b>For Supplier:</b>
<b>Expected date of delivery: 2021-04-30</b>	<b>Expected date of delivery:</b>
<b>Place of delivery: hjhjhjhj</b>	<b>Quotation guaranteed for (No days/mths):</b>
 <b>Signature and stamp:</b>	<b>Signature and stamp:</b>
<b>Date: 2021-04-20</b>	<b>Date:</b>