To: Sugatsune Kogyo

OEM QUOTATION REQUEST

Sending Date	Day/Month/Year:	
Number of Pages (Including this page)		Page(s)

Quotation	on Details	(Please co	omplete a	II items.
	orano	(Jiiipioto a	

Project Name **Please describe in details for what kind of equipment you want to use.																
Item Name (e.g.) Butt Hinge LSB-40																
_																
Comtout																
Content (e.g.) Size change to the attached																
drawings, etc.																
Quotation Quantity (e.g.) 10,000 pcs															pc(s)
Use Quantity	pc(s)	/year		р	c(s)/ı	non	th	(Others ()	
Period of Use								Yea	r(s)					Моі	nth(s)
Asking Unit Price			D	esi	red	Re	oly	Date	Э							

Your	Contac	t In	forma	ation

	Company		Name		
Required	Division		TEL		
	E-mail		FAX		
	Address	Postcode:	(Number, Street):	(City, State/ Prefecture):	
Optional	3D CAD Software in Use (Version)	SolidWorks (CATIA (todesk Inventor (ners ()



Updated 2017.10.27

To: Sugatsune Kogyo

ODM QUOTATION REQUEST

Sending Date	Day/Month/Year:	
Number of Pages (Including this page)		Page(s)

Quotation Details (Please complete all items.)

Project Name **Please describe in details for what kind of equipment you want to use.														
Content Please freely fill in figures and specifications (dimensions, materials, finish, product features, and concept, etc.).														
Quotation Quantity													po	c(s)
Use Quantity	рс	pc(s)/month			Others ())			
Period of Use							Year	(s)				N	lont	th(s)
Asking Unit Price			Use Start Time					Trial Production Time : Month/Year ~ Mass Production Time : Month/Year ~						~

**Please note that we may be unable to meet your requirements depending on the content.
**We may contact you to confirm the content of the entry.

■Your Contact Information

Required	Company		Name		
	Division		TEL		
	E-mail		FAX		
	Address	Postcode:	(Number, Street):	(City, State/ Prefecture):	
Optional	3D CAD Software in Use (Version)	SolidWorks (CATIA ()	odesk Inventor (ers ()

