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| **PRODUCT INFORMATION** |
| **Quick Quote Only – no sample requested** **[ ]**  |
| **Distributor name:**  |  |
| **Contact name:** |  |
| **Distributor address:** |  |
| **Product Code:** |  |
| **Product description:** |  |
| **Annual quantity:** |  |
| **Intended use:** |  |
| **Final Product Packaging:** | **[ ]**  Sterile **[ ]** Non-sterile |
| **Sample Qty requested:** | **[ ]  Sales Rep. x EACH**   **[ ]  QA x EACH** |
| **Sample Packaging:** | **[ ]**  Sterile **[ ]** Non-sterile |
| **Comments:**  |

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| **SHIPPING METHOD** |
|  | **Sample to rep** | **Sample to QA** |
| **Courier requested:** |  |  |
| **Courier account no.:**  |  |  |
| **Shipping address:** |  |  |

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| **COMPONENT LIST** (IF NEW PRODUCT) |
| **Part number:** | **Description:**  | **UOM** | **Quantity** |
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