



# All Pack Midwest Quote Form

## Company Info

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

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

\_\_\_\_\_

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

Phone \_\_\_\_\_ Alt Phone \_\_\_\_\_

Email \_\_\_\_\_

## Box Information

Flute (E or B): \_\_\_\_\_

Full Bleed or 30% Coverage: \_\_\_\_\_

W/K, K/K, or W/W: \_\_\_\_\_

# of Colors: \_\_\_\_\_

Pantones: \_\_\_\_\_

Sizes (and Depth): \_\_\_\_\_

Est. Monthly Usage per size : \_\_\_\_\_

\_\_\_\_\_

## Distribution

# of Stores: \_\_\_\_\_

Distribution \_\_\_\_\_