|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Customer/ Salesmen/ Distributor name: | shipping address, contact person & phone number: | Urgency: | Standard Model form catalog or special request: | If special request-Description of the required model/s: |
| 3 Axis Development  Joseph Kowen | 8461 Lake Worth RD, suite 212  Lake Worth FL 33467  Charles Koch  +1 (561) 752-9095 | Moderate | Standard | Size : Conditioner bottle 30 – 40 cm    Closed or open floor: open    Printing mode: quality  File location : ido |

Additional information: Ship by mail \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

------ This side will be filled by MASSIVit ----

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Printing time and material consumption: | Estimated date for shipment: | Delivery method, cost + packaging cost: | Total customer invoice: | Date of release to delivery: |
|  |  |  | For shipment:  For sample: |  |

Approved by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Order Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Once approved- notify Eli or Elirav and after known cost- Limor