



# QUOTATION REQUEST FORM

CUSTOMS

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To: Customer Service  
Inorganic Ventures  
300 Technology Drive  
Christiansburg, VA 24073

- 1 Photocopy this page.
- 2 Fill out the form.
- 3 Fax to 1.540.585.3012.

Date\*: \_\_\_\_\_ \*Prices guaranteed for 60 days.

From: Name \_\_\_\_\_

Company \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Email \_\_\_\_\_

Account No. \_\_\_\_\_

Phone \_\_\_\_\_

Fax \_\_\_\_\_

### Describe your blend:

Analyte	Concentration	Analyte	Concentration
1. _____	_____	21. _____	_____
2. _____	_____	22. _____	_____
3. _____	_____	23. _____	_____
4. _____	_____	24. _____	_____
5. _____	_____	25. _____	_____
6. _____	_____	26. _____	_____
7. _____	_____	27. _____	_____
8. _____	_____	28. _____	_____
9. _____	_____	29. _____	_____
10. _____	_____	30. _____	_____
11. _____	_____	31. _____	_____
12. _____	_____	32. _____	_____
13. _____	_____	33. _____	_____
14. _____	_____	34. _____	_____
15. _____	_____	35. _____	_____
16. _____	_____	36. _____	_____
17. _____	_____	37. _____	_____
18. _____	_____	38. _____	_____
19. _____	_____	39. _____	_____
20. _____	_____	40. _____	_____

Units:

µg/mL                       mg/L

µg/L                          ng/mL

µg/g                          ng/g

µg/Kg                       g/mL

Volume:

125 mL                       \_\_\_\_\_ units

250 mL                       \_\_\_\_\_ units

500 mL                       \_\_\_\_\_ units

1,000 mL                    \_\_\_\_\_ units

\_\_\_\_\_ L                     \_\_\_\_\_ units

Matrix:

\_\_\_\_\_

Inorganic Ventures can specify

Requested Delivery Date: \_\_\_\_\_

**Next-Day RUSH Manufacturing**  
Solution will arrive in 48-72 business hours  
at no additional manufacturing charge.

Specified Requirements: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

You may also request quotations online:  
[inorganicventures.com](http://inorganicventures.com)