



MUCH MORE  
THAN A  
WINDOW

## INVOICE REQUEST FORM

Click to enter a date.

<b>PROJECT NAME:</b>	
<b>QUOTE # / VERSION:</b>	
<b>DEALER/CUSTOMER:</b>	
<b>DEALER/SALES REP:</b>	
<b>SALES REP CONTACT INFO:</b>	
<b>BILLING ADDRESS:</b>	
<b>INVOICE TYPE:</b>	Shop Drawing Deposit <input type="checkbox"/> Production Deposit <input type="checkbox"/> Final Balance Due <input type="checkbox"/> Change Order Deposit <input type="checkbox"/> Service <input type="checkbox"/> Parts <input type="checkbox"/> Other <input type="checkbox"/>
<b>OPTIONS TO BE INCLUDED IN TOTAL:</b>	
<b>DEPOSIT AMOUNT:</b>	\$      or      %
<b>REQUESTED BY:</b>	
<b>SPECIAL COMMENTS:</b>	Click here to enter text.
<b>OTIIMA USA TERMS:</b>	25% deposit to begin shop drawings 50% deposit of total adjusted pricing after shop drawings to begin production Balance due upon delivery

**A copy of the proposal must be attached to this form in order to process the invoice request.**