

QUOTATION #1173019

THD/NEW ORLEANS-Gonzales
 Accounts Payable B-12
 Atlanta, GA 30339-4024
 Phone: 863-284-5637
 Fax:

Sim #: 007205
 Emp:
 Entered: 10/27/2022
 Xmitted:
 PO #: 11188820

Customer #: 007205
 THD/NEW ORLEANS-Gonzales

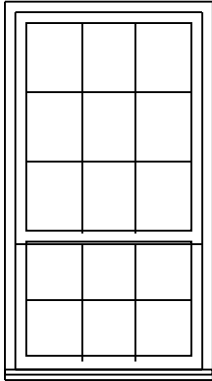
Job Name: THD/NEW ORLEANS
 Project ID:
 Location:
 Lot #:
 Model:
 Contact:
 Cust PO#:

Home Owner:

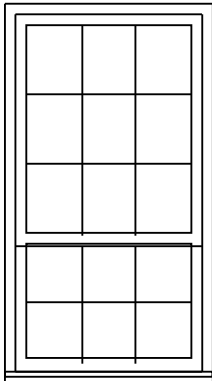
Phone:
 Fax:

Ln No	Qty Ord	Long Description
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01 1 39 1/4" (T) X 71 1/4" (T) 6100 White Double Hung; Tip-to-Tip Oriel from Top 42.75"; 2BOX; Colonial All White Flat (2V2H) (2V1H); Intercept; ProSolar Low E; Argon Gas; Double Glazed; Regular Strength; Half Screen Fiberglass Extruded Screen Mold; Foam Wrap; A9 All Rails&Stiles; Two Air Latches; Two White; Plain; Head Expander; Sill Extender (UI=111"); DP:25; Test Number=B6472.01; U-Factor:.32; SHGC:.27; Unit is not certified for any ENERGY STAR® regions.; Room ID: Living Room



02 1 39 1/4" (T) X 71 1/4" (T) 6100 White Double Hung; Tip-to-Tip Oriel from Top 42.75"; 2BOX; Colonial All White Flat (2V2H) (2V1H); Intercept; ProSolar Low E; Argon Gas; Double Glazed; Regular Strength; Half Screen Fiberglass Extruded Screen Mold; Foam Wrap; A9 All Rails&Stiles; Two Air Latches; Two White; Plain; Head Expander; Sill Extender (UI=111"); DP:25; Test Number=B6472.01; U-Factor:.32; SHGC:.27; Unit is not certified for any ENERGY STAR® regions.; Room ID: Living Room



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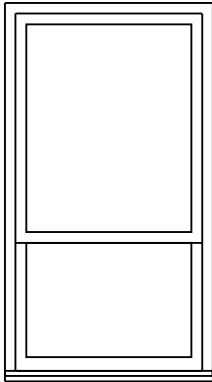
Job Name: THD/NEW ORLEANS
 Project ID:
 Location:
 Lot #:
 Model:
 Contact:
 Cust PO#:

Home Owner:

Phone:
 Fax:

Ln No	Qty Ord	Long Description
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03	1	39 1/4" (T) X 71" (T) 6100 White Double Hung; Tip-to-Tip Oriel from Top 42.5625"; 2BOX; Intercept; ProSolar Low E; Argon Gas; Double Glazed; Regular Strength; Half Screen Fiberglass Extruded Screen Mold; Foam Wrap; A9 All Rails&Stiles; Two Air Latches; Two White; Plain; Head Expander; Sill Extender (UI=111"); DP:25; Test Number=B6472.01; U-Factor:.32; SHGC:.30; Unit is not certified for any ENERGY STAR® regions.; Room ID: Bedroom
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Model:
Contact:
Cust PO#:

Home Owner:

Phone:
Fax:

Ln No	Qty Ord	Long Description

3 Total Qty Windows 3 Total Qty Units

NOTES:

Submitted by: _____ Accepted by: _____ Date: _____