



REQUEST FOR QUOTATION



**SRF—RF—BLANK SERIES
CUSTOM MODIFICATIONS
CUSTOM SPECIFICATIONS**

**Please submit your quote
on the materials or
services as listed below.
When corresponding
reply to:**

Company Name _____

Program _____

Project Engineer _____

To: **CPI Aero—Compac RF**

91 Heartland Boulevard

Edgewood, NY 11717

Attn: Sales Department—Compac

EMAIL: compac_sales@cpiaero.com

TEL: 631.586.5200

FAX: 631.586.5840

Company Name _____

Address _____

Phone () _____ Ext. _____

Contact _____

Email _____

Your quote should reach us no later than:

Phone Date _____ Written Date _____

ITEM #	QTY	PART NUMBER	DESCRIPTION



91 Heartland Boulevard
Edgewood, NY 11717
TEL 631.586.5200
FAX 631.586.5840
www.cpiaero.com

Delivery Required _____

Signed _____

Instructions for specifying a CPI Aero Compac Customer Enclosure.

Specify where applicable-

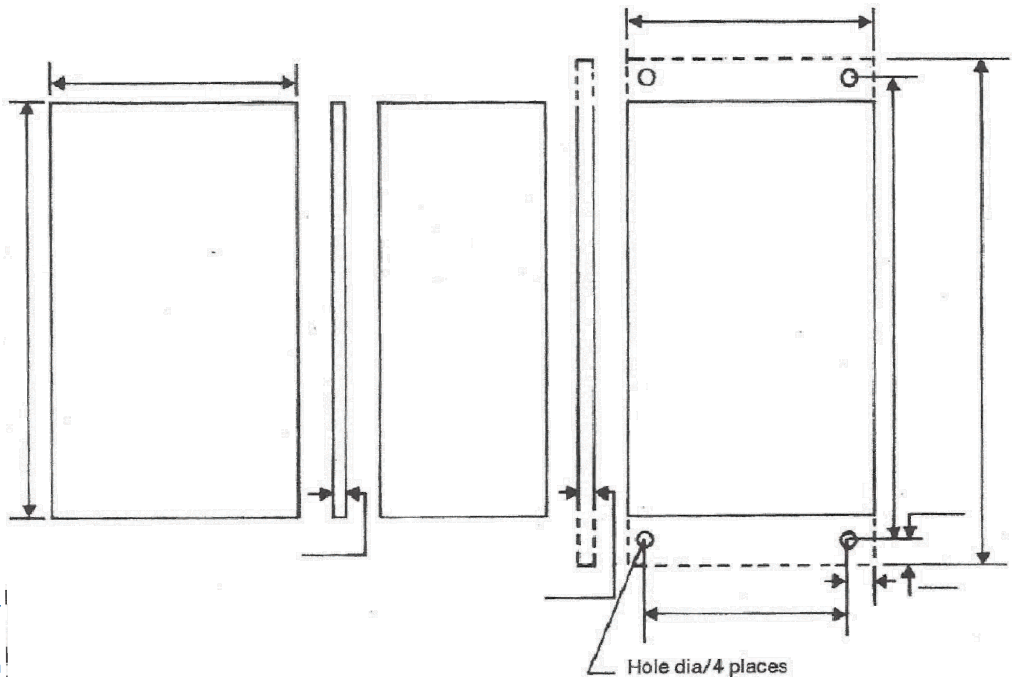
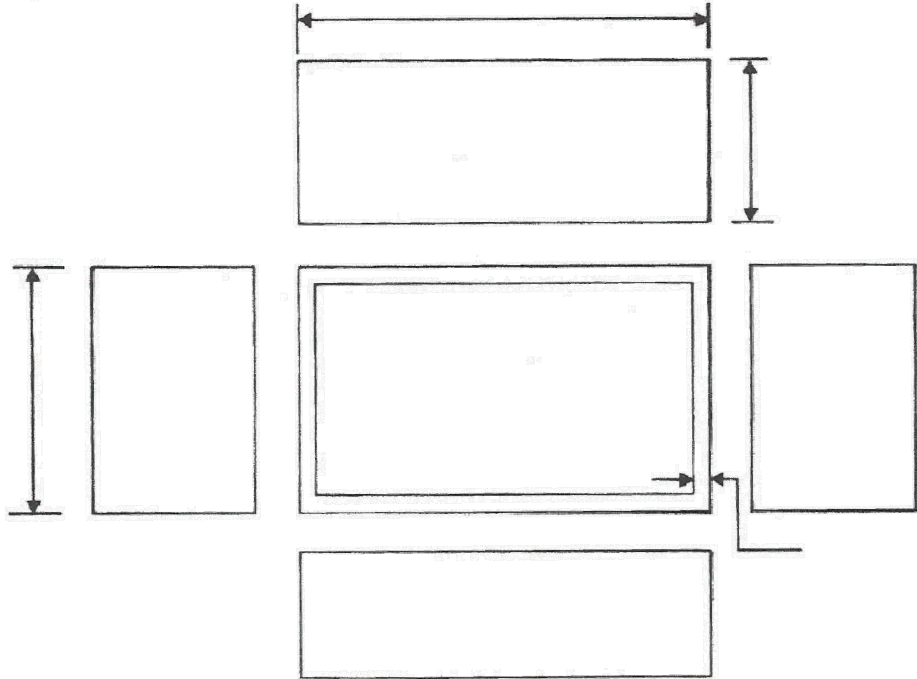
- Length & Width Dimensions
- Wall Thickness
- Modifications to Enclosure, i.e., Connector and Placement, or Filter Placement
- Hole Type (Countersink, Tap, Thru)
- Hole Dimension
- Method of Construction (SRF, RFT, or Blank)

Use this drawing to describe overall length, width, wall thickness, cover thickness. Describe whether optional extended mounting cover is desired, etc. Further use the various views to depict hole placement both on covers and sidewalls of the enclosure.

Type of Construction _____

SRT _____ BLANK _____

RFT _____ CUSTOM _____



CO. NAME _____

PRINT NUMBER _____