

Date Received:

Quote # \_\_\_\_\_ (for office use only)



# Engraving Quotation Request

Date of Request:		Required Date:	
Bill to Name:		Ship to Name:	
Address 1:		Address 1:	
Address 2:		Address 2:	
City:		City::	
State, ZIP		State, ZIP	
Phone:		Phone:	
Fax:		Fax:	
email:		email:	

## Font Types

Old English 2 line  
 Optima 3 line  
 Rockwell 5 line  
 Roman 3 line  
*SCR Polish 4 line*  
*Script 4 line*  
*Script Port 2 line*  
**Electro 6 line**  
 Fraktur 4 line  
 Gill Sans  
 Micro Port 3 line  
 Benguiat 6 line  
 Minion Regular  
 Minion SE Bold  
 Bodoni 4 line  
 Century 2 line  
 Century 5 line  
 Cheltenham 4 line  
 Clarendon 3 line  
 Franklin 3 line  
**Frutiger 65**  
**Frutiger 75**  
 Garamond 3 line

## Type Case

ALL CAPS  
 Upper/Lower Case  
 all lower case  
 SMALL CAPS

Item Quantity: \_\_\_\_\_

Item Description: \_\_\_\_\_

### Engraving Instructions

Line 1: \_\_\_\_\_

Line 2: \_\_\_\_\_

Line 3: \_\_\_\_\_

Fax Completed Form to: Engraving Dept. 866-454-7459 or  
 Email Completed Form to: [orders@ahoycaptain.com](mailto:orders@ahoycaptain.com)

Please call or email with any questions • 888-464-5581 • [orders@ahoycaptain.com](mailto:orders@ahoycaptain.com)