

# SAMPLES REQUEST FORM



Request by: \_\_\_\_\_

Purpose: \_\_\_\_\_

Chargeback to: Supplier

MDC

% Split

Release Order No.:

Approved by: \_\_\_\_\_

Date: \_\_\_\_\_

Item Number	Description	Qty Cases	Qty Bottles	Cost/Bottle	Cost/Case	Total Amout
TOTAL						

Received by: \_\_\_\_\_

Date: \_\_\_\_\_

**Martinez Distributing Co; Inc**  
 221 E Walnut St Suite 230  
 Pasadena CA 91101  
 Phone: (626) 683-3123