

Manufacturer's Representative Project Registration Form

Integrator Information:		End User Information:	
Name:		Name:	
Organization :		Organization :	
Website:		Website:	
Email ID:		Email ID:	
Telephone:		Telephone:	
Opportunity Information:			
		RAS Quote Number:	
Manufacturer's Rep Firm:		Manufacturer's Rep Contact:	
Regular Discount Percentage:		Additional Discount Percentage:	
Estimated Purchase Date:		Estimated Probability:	
Distributor of Record:		Distributor Contact:	
Disti Contact Ph:		Disti Contact Email ID:	

Date:

Project Name:

Approved by:

Raslient Systems Inc. Representative

Date