Optional Logo

COMPANY NAME
ADDRESS/SUITE
CITY/STATE/ZIP

Letter of Transmittal

To:

Name:
Address:
City:
State: *Select/Add* Zipcode:
Attn:

Date

File No

Job Name

Address

City/State/Zip

We Are Sending You:

The Following Items: ☐ Shop Drawings ☐ Plans ☐ Samples ☐ Specifications ☐ Product/Technical Data ☐

Carrier|Delivered By: *Select/Add*

Copies	Item Dated	Item No.	Description

DEMO

The above items are transmitted to you:

☐ For Approval ☐ Approved as submitted ☐ Resubmit for approval
☐ For your use ☐ Approved as noted ☐ Per your request
☐ Returned for Corrections ☐ For bid due on: ☐

Remarks:

Copy To:

Signed: