

1001

YOUR COMPANY NAME  
Your Company Address

DELIVERY DATE

AM  
 PM

S M T W T F S

SALESPERSON

ORDER DATE

CHARGE TO		<input type="checkbox"/> CASH <input type="checkbox"/> DEBIT <input type="checkbox"/> CHEQUE <input type="checkbox"/> CHARGE <input type="checkbox"/> C.O.D. <input type="checkbox"/> NEW ACCOUNT	
TELEPHONE (HOME)	TELEPHONE (CELL)		
CREDIT CARD #	EXPIRY DATE	AUTHORIZATION #	
DESCRIPTION			
SPECIAL INSTRUCTIONS		DELIVERY CHARGE	
		SUBTOTAL	
		HST/GST	
		<b>TOTAL</b>	