

COMPANY NAME

ADDRESS ADDRESS ADDRESS



NAME		DATE
ADDRESS		ORDER NO.
Р	OSTAL CODE	PHONE
QUANTITY DESCRIPTIO	N	A VUNT
	1	
V '		
CLERK MEMARKS:	PURCHASES	
	G.S.T.	
CASH CHQ. DEBIT PAID MDSE VISA M-C AMEX	ON SUB-TOTAL	
RECEIVED IN GOOD ORDER BY:	P.S.T.	
	TOTAL	



