

Customer's Name BONNIE THOMSON.  
Address MASTRICK DENTAL CENTRE  
6 GREENFERN PLACE, MASTRICK  
AB 16 Post Code 6JR

Tel. home	
Tel. work	
mobile	<u>07415679587</u>
email	

DATE MEASURED/ORDERED
<u>1 / 4 / 19</u>

CURTAINS	
PLEATED	
ROLLERS	<input checked="" type="checkbox"/> x3.
ROMANS	
SHUTTERS	
VENETIAN	
VERTICALS	
VISION	
WOODEN	

AM PM (MEASURING TIME)		
MON		
TUE		
WED		
THU		
FRI		
AM PM (FITTING TIME)		
MON		
TUE		
WED		
THU		
FRI		

P/CUST	
NET	
PRESS	
RADIO	
MAG.	
VAN	
RECC.	
SHOP	
TV	
YELL P	
OTHER	

**ALL BLINDS TO BE PAID FOR AT TIME OF FITTING**

Room	No.	Width	Drop	Slat Size	Colour	Control LH or RH	Fitting Height	Any other instructions	Price
SURFAY		8 30	11 00	Row	PHOENIX	RH	2400	CHROME	} £159 + VA
UP		8 30	11 00	"	WHITE	RH	"	CONTROLED.	
STAIRS.		8 30	11 00	"	"	RH	"	"	

rail type & colour alum white brown	white chain	welded in weight	recess size	window not square	wood fix	stone fix	brackets top face
							?

measured by	date	fitted by	date	CASH	CHEQUE	SPREE
<u>ODD O</u>	<u>25/4/19.</u>			INVOICE	CARD	

ALL BLINDS MANUFACTURED AFTER 1<sup>ST</sup> APRIL 2014 MUST COMPLY WITH NEW CHILD SAFETY LAWS. SAFETY DEVICES SUPPLIED WITH GOODS MUST BE FITTED BY US AT THE TIME OF INSTALLATION. REFUSAL TO ALLOW A SAFETY DEVICE TO BE FITTED WILL RESULT IN THE BLINDS NOT BEING INSTALLED. UNDER THE TERMS OF THIS CONTRACT YOU WILL BE LIABLE TO ACCEPT DELIVERY AND PAY THE FULL AMOUNT. I have ordered the above goods and agree to pay the amount shown in full at the time of fitting. If payment is not made in full at that time Aberdeen Blind Company Ltd has the right to remove the goods until full settlement is made. Title of the goods does not pass to the customer until payment has been made in full. Declaring that there shall be no liability for normal damage occasioned by such removal.

TOTAL PRICE £159 + VAT

DEPOSIT £

BALANCE £

To Be Confirmed

90 Ahead.

PRICE ACCEPTANCE

Customer's Signature

email

Special Instructions