

**ABERDEEN**  
BLIND COMPANY  
ESTABLISHED 1952

32 Esslemont Avenue  
Aberdeen  
AB25 1SP  
Tel: 01224 637609  
Fax: 01224 631172  
Email: sales@aberdeen-blinds.co.uk

46704

**CUSTOMER**  
**ORDER No.**

Customer's Name Jan Roy  
Address 14 Elm Place

Aberdeen Post Code AB25 3SU

Tel. home	
Tel. work	
mobile	07969637697
email	

DATE MEASURED/ORDERED  
19/ OCT 123

CURTAINS	✓	1-3
PLEATED		
ROLLERS		
ROMANS		
SHUTTERS		
VENETIAN		
VERTICALS		
VISION		
WOODEN		

AM PM (MEASURING TIME)		
MON		
TUE		
WED		
THU	✓	9-12
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	Width	Drop	Slat Size	Colour	Control LH or RH	Fitting Height	Any other Instructions	Price
	572	1230	135	582			SG. 1080	242
	139	3284	137	450			WHITE PACER Plus	
		2420 drop		Amiga Rosa			b/o Linen	
				A	B	C	D	
				621	816	1073	1367	
				242				
				863				

alum	anthracite	black	brown	champ-gold	chrome	silver	white	recess size	motorised	wood fix	stone fix	brackets top	brackets face
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measured by	fitted by	date	CASH	CHEQUE	SPREE
<u>[Signature]</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 50% deposit and the remaining balance on the day of fitting. If payment is not made in full at that time Aberdeen Blinds 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	£863—	To Be Confirmed	Special Instructions
DEPOSIT	£430—		
BALANCE	£433—		
PRICE ACCEPTANCE		Customer's Signature	
<u>[Signature]</u>			

To: Rainbow  
Date: 19/10/23  
Ref: 46704 Roy  
Rec: 8/11/23

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