

Customer's Name *Anna Price*
 Address *Vivienne O'Brien*
24 Holland Street
Abdn Post Code *AB25*
3UL

Tel. home	
Tel. work	
mobile	<i>077 38569405</i>
email	

DATE
 MEASURED/ORDERED
51 8 14

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

		AM PM (MEASURING TIME)		P/CUST
MON	<input checked="" type="checkbox"/>			NET
TUE				PRESS
WED				RADIO
THU				MAG.
FRI				CAN.
		AM PM (FITTING TIME)		RECC.
MON				SHOP
TUE				TV
WED				YELL P
THU				OTHER
FRI				

Before
CALL 3pm
Buzzer not working

Balance for order payable on arrangement of installation

Room	Width	Drop	Slat Size	Colour	Control LH or RH	Fitting Height	Any other Instructions	Price
<i>back</i>	<i>1185</i>	<i>1796</i>	<i>roll</i>	<i>bella</i>	<i>L</i>	<i>2420</i>		<i>162</i>
<i>bed</i>				<i>senec</i>			<i>chair</i>	
				<i>(a)</i>			<i>end</i>	
							<i>+ chair</i>	

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
<i>S.S.</i>			INVOICE	CARD	

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 a 50% deposit and the remaining balance when confirming the installation appointment. If payment is not made in full at that time, Aberdeen Blinds have the right to refuse to install the products 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 £ *160.*

DEPOSIT £ *80*

BALANCE £ *80*

To Be Confirmed

PRICE ACCEPTANCE
 Customer's Signature

[Signature]

Special Instructions

vivobrien796@aol.com

[Signature]