BAILEYS BLINDS

Unit 8 Jupiter Court
Orion Business Park
Tyne Tunnel Trading Estate
North Shields
Tyne & Wear
NE29 7SE

Tel: 0191 2585956
Fax: 0191 2595010

BRITISH BLIND & SHUTTER ASSOCIATION

ORDER

Order No. RK 305822

B No. .....

Date of Order 4.12.14

Cust. Order No. .....

Source BSO/INT

Where did you see our name?

FILE NAME: ..... A/C No: .....

INVOICE ADDRESS

POST CODE TEL FAX

DELIVERY ADDRESS (if different from Invoice Address)

SCURSFIELD
16 GLENSIDE
ELLINGTON

POST CODE NE61 5LS TEL 861577 FAX

TYPE	QTY	LOCATION	SLAT SIZE	FABRIC / COLOUR	H / R COL	DIMENSIONS WIDTH	DIMENSIONS DROP	I / R or O / R	FIX	CONTROL	BUNCH VLB	TWIST VB	SCALLOP TRIM	PRICE
Roll	1	BATH		Dragonfly Black		55.	46	1	T	L.		1397 1168		
										2100				

NAME

CARD EXPIRY DATE .....

AUTHORISATION No. DEPOSIT ...../ BALANCE ..... ISSUE No.

SOLD BY RPL INSTALLED BY .....

BEST FITTING DATE R.W.R

FITTED TO CUSTOMER'S SATISFACTION .....

TOTAL EXCL VAT	
VAT @ %	
TOTAL INCL VAT	98.00
DEPOSIT (CSH) CH BC	30.00
BAL ON FITTING	68.00

BALANCE PAID	DATE		
REC BY:	CSH	CH	BC

THIS IS YOUR OFFICIAL ORDER TO BAILEYS BLINDS

In the event of a cancellation, you MUST contact (0191) 2585956 by 4pm the following working day from the date of order and obtain a cancellation number. Cancellations cannot be accepted by either salesmen or shop staff. Urgent orders may be processed immediately on forfeit of you right to cancel by initialling this box ☐

All delivery estimates are made in good faith and do not constitute part of this contract. Baileys cannot accept responsibility for inaccurate sizes, sizes given the wrong way round, or incorrect specifications as supplied by the customer.
The balance due must be paid when the blinds are installed. (Account customers according to our written agreement terms).

BAILEYS BLINDS HOLD TITLE TO ALL GOODS UNTIL PAID FOR IN FULL

I confirm this order and accept Baileys Blinds Ltd Conditions of Sale ..... Date 4.12.14

Baileys Blinds Gosforth

Roller Blind Order Form

Fax No. 305822

Date: 4.12.14

Date Re: 12-12-14

Contact name: SCURSFIELD

Customer Order No: 305822

Page ____ of ____

No	Fabric	Colour	W	D	Rec	Con	Fix	Scallop	Pole	Braid
1	DRAGONFLY	BLACK	1397	1168	1	L	T	STRAIGHT	NO SEW BAR	

Special Instructions:- U/H 2100

TRANSMISSION VERIFICATION REPORT

TIME : 05/12/2014 09:03
NAME :
FAX :
TEL :

DATE,TIME	05/12 09:03
FAX NO./NAME	RAINBOW
DURATION	00:00:39
PAGE(S)	01
RESULT	OK
MODE	STANDARD ECM

Baileys Blinds Gosforth

oller Blind Order Form

Fax No. 305822

ate: 4-12-14

Date Re: 12-12-14

ontact name: SCURIFIELD

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Page ____ of ____

o.	Fabric	Colour	W	D	Rec	Con	Fix	Scallop	Pole	B
1	DRAGONFLY	BLACK	1397	1168	1	L	T	STRAIGHT	[illegible]	
								SCU [illegible]		