



Tel: 028 9085 2525



Firgrove House
40 Ballyrobin Road
Templepatrick
Ballyclare
BT39 0JH

Tel: 02894439101
Email: info@cityblindsni.co.uk
Website: www.cityblindsni.co.uk
VAT: GB392664617

INVOICE

Invoice No.	23267
Account Number	NIHO1001
Invoice Date	10-10-2022
Cust. Reference	A013148

Invoice To	NI HOSPICE NI HOSPICE SOMERTON RD BELFAST, BT15 3LH
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Deliver To	NI HOSPICE NI HOSPICE SOMERTON RD BELFAST, BT15 3LH
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Item	Qty	Description	Each	VAT	Total
Rollers	1	Rollers, 70 5/8 x 55 Unilux, Cream, Right Hand Side, System 32mm,			
Rollers	1	Rollers, 70 1/2 x 94 Unilux, Cream, Left Hand Side, System 32mm,			
Rollers	1	Rollers, 53 x 97 Unilux, Cream, Right Hand Side, System 32mm,			
Rollers	1	Rollers, 48 x 44 Unilux, Cream, Left Hand Side, System 32mm,			
Rollers	1	Rollers, 47 1/4 x 22 Unilux, Cream, Left Hand Side, System 32mm,			
Rollers	1	Rollers, 33 3/4 x 42 Unilux, Cream, Left Hand Side, System 32mm,			
Rollers	1	Rollers, 51 1/2 x 55 Unilux, Cream, Left Hand Side, System 32mm,			
Rollers	1	Rollers, 70 x 56 Unilux, Cream, Left Hand Side, System 32mm,			
Rollers	1	Rollers, 53 3/8 x 76 Unilux, Cream, Left Hand Side, System 32mm,			
	1	FITTED CHILDRENS HOSPICE			

Customer Message

Subtotal:	£850.00
VAT:	£170.00
Payments:	£0.00
Total:	£1,020.00

Payment by Bacs. Bank Name: xxxxxx, Sort Code: 09 01 28, Account Number: 86548664. Please provide quote/invoice number on all payments.

Remittance Advice

Customer:	NI HOSPICE
Invoice:	23267
Invoice Date:	10/10/2022
Total Due:	£1,020.00
Paid:	£ <input type="text"/>

Please detach and send with payment to:

City Blinds
Firgrove House
40 Ballyrobin Road
Templepatrick
Ballyclare
BT39 0JH