



Purchase Order

Buyer: Carolyn Nutley
 Tel: 01534 877688
 Fax: 01534 877699
 E-Mail:

ORDER NUMBER	PAGE
323PJ:00142/1	1 of 1

SUPPLIER
CP INTERIORS RUE DES PRES TRADING ESTATE ST SAVIOUR JERSEY JE2 7QN Phone: Fax: Contact:

DELIVER TO
TO SUPPLY & FIT X 3 NEW BLINDS OFFICE 1 FLOOR ONE LIBERATION STATION ST HELIER JERSEY JE2 3AS

ORDER DATE	SUPPLIER ACCOUNT	CONTRACT TITLE	DELIVERY INSTRUCTIONS
21-07-21	CPI01	TO SUPPLY & FIT X 3 NEW BLINDS OFFICE 1	TO OFFICE 21-07-21

SPECIAL INSTRUCTIONS	SITE CONTACT	BUYER
	LAURA	CN01 - Carolyn Nutley

LINE	MAT CODE	QTY	UNIT	DESCRIPTION	UNIT PRICE	AMOUNT
0010	S	1.000	Each	3 NEW BLINDS OFFICE 104	464.0000	464.00

PLEASE QUOTE OUR ORDER No. ON ALL CORRESPONDENCE

TOTAL £464.00

DIRECT ALL INVOICES & CORRESPONDENCE TO
AMALGAMATED FACILITIES MGT JSY LTD CTV House La Pouquelaye St Helier Jersey JE2 3TP

VAT Reg:

Job Ticket



Date: 21/07/2021 0 15:00:27

Task ID:

323PJ:00142

Client Order No

CWP002682268

Task Requested by:

LAURA NORGATE

REGUS

FLOOR ONE

LIBERATION STATION

ST HELIER

JERSEY

JE2 3AS

Property Key 323PJ

Site Contact

Site Tel No

Priority **Normal**

Target Time 21/07/2021 15:00:27

Description of Works:

To be carried out by (contractor)

TO SUPPLY & FIT X 3 NEW BLINDS OFFICE 104 QUOTED

FITTER MUST GET SIGNED DATED JOB WORK
REPORT ON COMPLETION

1389 Jersey - To supply and fit x3 blinds in Office 104

ACCEPTANCE PO FOR QUOTATION SO12000
SUPPLY AND FIT X 3 NEW BLINDS AS PER QUOTE
PLEASE ORDER AND PROVIDE ETA FIT ASAP

Job Work Report must be completed and signed by the client following any attendance of this task.

All JWR's are to returned to AFM office within 5 working days for processing.

Where required, KPI line to be called on attendance or completion of a task.

Engineer to request, review and sign the site's Asbestos Register prior to commencing any works.

Concerns resulting from the potential presence of asbestos containing materials in the area(s) you intend to work should be raised with the client/line manager immediately.



SUB-CONTRACTORS JOB WORK REPORT

CLIENT NAME/SITE:REGUS	TASK ID 323PJ00142
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DATE:	ARRIVAL TIME:	DEPARTURE TIME:
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TASK DESCRIPTION
FIT NEW BLINDS OFFICE 104

ENGINEERS COMMENT:

CLIENT SIGNATURE:	PRINT NAME:
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PLEASE GET THE JOB WORK REPORT SIGNED AND SCANNED BACK TO AFM SERVICE DESK ON COMPLETION
FAILURE TO COMPLY WITH THIS CLIENT REQUEST WILL RESULT IN LATE OR NON PAYMENT OF WORKS