Work Diary

Staff Name Adrian

Order No	**Measurer or Fitter**	**Contact Address**	**Customer Ref**	**Date**	**Time**
SO12043	Measurer	Mrs.Teresa Leggit, 1 Southlands, Green Road, St Clement, JE2 6QA, 852325, 07797737771, teresaleggit21@gmail.com		13-07-2021	14:30

Notes : Blinds
? Pfier or Twist

Location	Supplier	Blind Type /Description	Colour	Qty	Width	Drop	Fitting Height	Blind/Recess	Controls	Brackets	Surface	Unit Price
Bed 1		Single Meshed	Voile	1	245	760	Glass				40+	134
|		Slindi	TBA				20mm	*				
|		Insu white					Г					
|		Hardware		1	490	760	|				40+	152
|		|		1	520	760	|				40	+152
|		|		1	490	760	|				40	+152
|		|		1	245	760	|				40	+134
Therapy		Multi-shade		1	1580	1450		Ref	LHC	TC		
room		or										
		Duo-roll										

Comments:

* Need to check beading profile with ACW

Order Date

Customer Signature
X
I have checked and agree with the above choices

Target Fitting Date