**Staff Name** Adrian

# Work Diary

| Order No | Measurer or Fitter | Contact Address | Customer Ref | Date | Time |
|---|---|---|---|---|---|
| SO12633 | Measurer | .Isabel Taylor, Apartment 8 Regency House, Regent Road, St Helier, JE2 4UZ, 721753, | | 22-11-2021 | 09:00 |

**Notes :** 0 doesn't have email - quote for roman blind ~~and/or venetians.~~

| Location | Supplier | Blind Type /Description | Colour | Qty | Width | Drop | Fitting Height | Blind/Recess | Controls | Brackets | Surface | Unit Price |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Bed | Trop | Roman | | 1 | 2180 | 1450 | | B/S | CHR | FACE | | |
| | | | | | | | | | (ASCARE BASTEN) | | | |
| LV | | Pair eyelet | | 1 | 2400 | 2400 | | | | | | |
| | | Curtains on | | | Pole | Fabric | drop | | | | | |
| | | neo pole | | | WIDTH | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| Kitchen | Trop | 50mm Faux | white | 1 | 1000 | 1240 | | B/S | STAN | TOP | | |
| | | Wood Venetian | | | | | | | | | | |
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Comments:

Order Date

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

Target Fitting Date