



INVOICE

Old Central Garage
 High Street, Bryngwran
 Holyhead
 Anglesey
 LL65 3PP

Invoice No.	ON33470
Account Number	TRAC1002
Invoice Date	12-07-2023
Cust. Reference	9796756

Tel: 01407 720333 / 0800 43 55 49
 Email: info@lloydsblinds.co.uk
 Website: www.lloydsblinds.co.uk
 VAT No: 753594110

Invoice To	Tracey Penrhos Stanley Hospital Glasmor Ward Holyhead LL65 2QA
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Deliver To	Tracey Penrhos Stanley Hospital Glasmor Ward Holyhead LL65 2QA
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Location	Product	Description	Qty	Net	Total
A L	Roller Blind	Room: A L, Recess, 40.12 inch, 45 inch, Fabric: Palette FR, Colours: Baby Lavender, Group B, Chrome, Right	1		
A L	Roller Blind	Room: A L, R, Recess, 40.12 inch, 45 inch, Fabric: Palette FR, Colours: Baby Lavender, Group B, Chrome, Left	1		
Select	Roller Blind	BL, Recess, 40 inch, 45 inch, Fabric: Palette FR, Colours: Baby Lavender, Group B, Chrome, Right	1		
Select	Roller Blind	BR, Recess, 40 inch, 45 inch, Fabric: Palette FR, Colours: Baby Lavender, Group B, Chrome, Left	1		
Select	Roller Blind	CL, Recess, 39.75 inch, 45 inch, Fabric: Palette FR, Colours: Sky, Group B, Chrome, Right	1		
Select	Roller Blind	CR, Recess, 35.62 inch, 45 inch, Fabric: Palette FR, Colours: Sky, Group B, Chrome, Right	1		
Select	Roller Blind	QF, Recess, 35.62 inch, 45 inch, Fabric: Palette FR, Colours: Sky, Group B, Chrome, Right	1		
Select	Roller Blind	QB, Recess, 32.87 inch, 58 inch, Fabric: Palette FR, Colours: Sky, Group B, Chrome, Right	1		

Customer Message

Subtotal:	£ 562.50
VAT:	£ 112.50
Total	£ 675.00
Payments:	£ 0.00
Balance:	£ 675.00

Payment by Bacs. Bank Name: HSBC, Sort Code: 40-30-14, Account Number: 11473808. Please provide quote/invoice number on all payments.