

SALES ORDER PAD

Mr/Ms/Miss Rusken Paim
Sitzer

Address _____

Post Code _____
 PSM _____

Tel: Home _____ Work _____
 Mob _____

Delivery Address _____
 (if different) _____
 Post Code _____

Sales Person _____

61/52 Derby Square, Douglas, Isle of Man IM1 3LP T: 01624 629940 F: 01624 662297
 E: sa@talbotson.co.uk WWW: www.talbotson.co.uk

Talbot & Son

Customer Order No. TS. 8202. TR Order No. _____

Purchase Order No. _____

Quantity Measured _____

Days & Time Fix _____

Room	Qty	Width	SW	Depth	Sh	Product	Serial Ref	Trim Style	Size	HW	Cont	Back	MD	Fix	Special Instructions	Code	Price
HEADS OFFICE	1	1760	R	1580	3	Source and last time			25					45 mm	x 3		
	1	1760	R	1580	11									EXT Bag. x 3	x 3		
	1	1760	R	1580	N									x 3			
Room	3	1750	R	1550	u									x 3			
	4	1770	R	1550	N									x 12			
	1	1760	R	1550	N									x 3			
OFFICE	1	1325	R	1505	A									Door top			
MEDICAL ROOM	1	1330	R	1510	N									N			

(27) @ 1.25ek



As a member of the BBSA we fully support the Make it Safe campaign. We have offered child cord restraints and/or child seats with added safety options but you have a choice to make please contact us to discuss this.

Customer's Signature _____

TOTAL