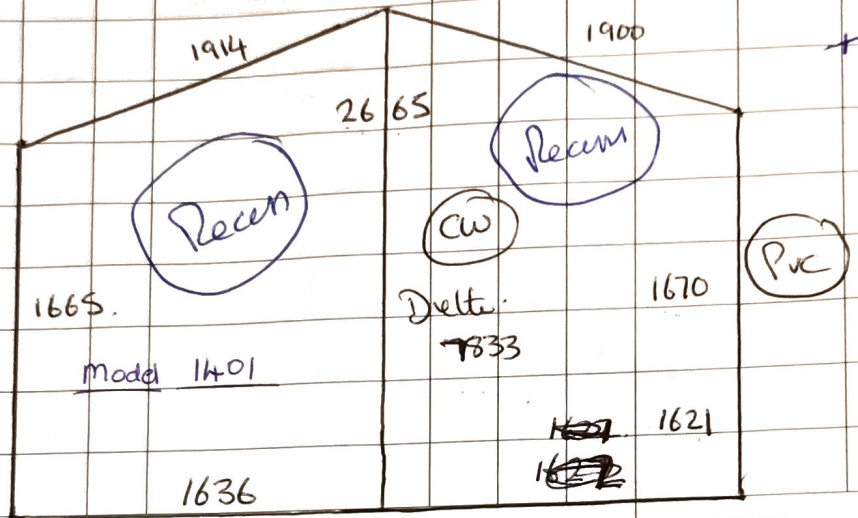


Room	Qty	Width	FW R B	Drop	F.H.	Product or Code	HW Col	Size/ Roll	No. Louv	Cont.	Bracket Type	Code
Bed	1	1655	R	1695	2 8	memphis Ecro				Link off.		137
	1	1798	R	2250		Lux Delta Model 1100 UMK 7833 Model 1100				LH SMARTCORD	P/Fix DE	627 497



NO1 Special Instructions

TAKE COM ROOF SPACERS WITH YOU
See Any

BLINDS TOTAL	
FITTING CHARGE	60-60-
TOTAL	
DEPOSIT PAID <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>	
C/C <input type="checkbox"/> CASH <input type="checkbox"/> CHQ. <input type="checkbox"/>	
BALANCE	

Mr/Mrs/Ms. J NASH.

Address SOUTHFIELDS
ABBINGDON.

Post Code FM4 5EG

Telephone (H) 335777 (W) _____

Mobile MR 335666

Email info@southfieldsblinds.co.uk

DATE RECEIVED 15/4/19

OUR ORDER No. 12814

QUOTE I.D. _____

WORKS ORDER No.: _____

CUSTOMER SIGNATURE: J. Nash

DATE MES. & TIME _____

DATE, FIX & TIME _____

FIXING TIME _____

PURCHASE ORDER NO.: _____

ID NO: 40396

