

61 Canyon Road
 Wishaw
 ML2 0EG
 Phone: 01698 351888
 Fax : 01698 351999

Invoice Address
Sunrite Retail 61 Canyon Road Wishaw ML2 0EG Ph: 01698 351888

Delivery Address
Sunrite Retail 61 Canyon Road Wishaw ML2 0EG Ph: 01698 351888

Our Reference Number	Date	Cust. Reference
RON1603	10-03-2025	RAIN 9338 HAMILTON

Product Name	Qty	Description
Roller	1	To Supply Roller, Quantity: 1, Group A_R, 910, 833, Fitting Height: 2420, Fabric: Bella B/O (200), Color: Cashew, Recess, No Cassette, No Fabric Cover, 32mm System Type Max 2m width, White, Plastic Chain, White Breakaway, Right, 32mm Standard Roller Bracket, Standard, Straight, Eclipse No Sew, N A, Child Safety Required: Yes, Chain System: Breakaway, FLAT END CAPS
Roller	1	To Supply Roller, Quantity: 1, Group A_R, 1015, 945, Fitting Height: 2430, Fabric: Bella B/O (200), Color: Cashew, Fabric size, Louvolite 70mm Open Cassette, White, Fabric Co ordinating, 32mm System Type Max 2m width, White, Plastic Chain, White Breakaway, Right, Face Fix Cassette Only, Standard, Straight, Eclipse No Sew, N A, Child Safety Required: Yes, Chain System: Breakaway, FLAT END CAPS
Roller	1	To Supply Roller, Quantity: 1, Group A_R, 860, 2090, Fitting Height: 2090, Fabric: Bella B/O (200), Color: Cashew, Fabric size, Louvolite 70mm Open Cassette, White, Fabric Co ordinating, 32mm System Type Max 2m width, White, Plastic Chain, White Breakaway, Left, 32mm Standard Roller Bracket, Standard, Straight, Eclipse No Sew, N A, Child Safety Required: Yes, Chain System: Breakaway, ONE CASSETTE 1785 RECESS TO COVER THE TWO ROLLER,FLAT END CAPS
Roller	1	To Supply Roller, Quantity: 1, Group A_R, 860, 2090, Fitting Height: 2090, Fabric: Bella B/O (200), Color: Cashew, Fabric size, Louvolite 70mm Open Cassette, White, Fabric Co ordinating, 32mm System Type Max 2m width, White, Plastic Chain, White Breakaway, Right, 32mm Standard Roller Bracket, Standard, Straight, Eclipse No Sew, N A, Child Safety Required: Yes, Chain System: Breakaway, ONE CASSETTE 1785 RECESS TO COVER THE TWO ROLLER,FLAT END CAPS

Customer Name (Printed): _____ Customer Signature: _____

Date : _____