

CUSTOMER ORDER FORM

Customer's Order / Reference Number (if applicable): _____

PART CODE / DESCRIPTION	NO.	UNIT COST (£)	EXTENDED PRICE (£)
* VAT Exemption form available for qualifying individuals or Registered Charities.			DELIVERY (£)
			VAT* @ 20%
			TOTAL (£)

INVOICE ADDRESS

Name _____

Company _____

Address _____

Post Code _____

Tel. No. _____

Fax No. _____

DELIVERY ADDRESS

Name _____

Company _____

Address _____

Post Code _____

Tel. No. _____

Fax No. _____

Authorised signature _____

Print name _____ Date _____