

ORDER FORM

COMPANY'S NAME: _____

PURCHASE ORDER #: _____

DATE: _____

ORDERING PERSON: _____

CONTACT PHONE: _____

FOR DELIVERY SHIP DATE: _____ Today

FOR PICK UP

CANPAR PUROLATOR

PICK UP DATE: _____ Today

UPS OTHERS: _____

PICK UP LOCATION:

TRUCK/TRANSPORT: _____

Mississauga

Markham

	STOCK NO	COLOR/	DESCRIPTION	QUANTITY ORDERED	IF BY CASE CASE QTY.	REMARK
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						
19						
20						