



Fax Express Order Form

Date

SOLD TO

SHIP TO

PO Number, Ordered by, Phone Number, Fax Number, Shipped Via

Table with columns: QUANTITY ORDERED, PART NUMBER, DESCRIPTION, PRICE EACH, TOTAL AMOUNT

All merchandise remains the property of Impact Store Equipment Ltd. until paid for in full.

SUB-TOTAL, G.S.T., TOTAL

Terms agreed upon by purchaser: X

Method of Payment: Cheque Enclosed, VISA, MasterCard

Card Number, Expiry Date

Cardholders Signature: X

Please make cheque payable to Impact Store Equipment Ltd. For terms and conditions of sale please see catalogue cover, inside back page.

RETURN FAX EDMONTON 454-9470 1-866-446-7222

PLEASE PHOTOCOPY THIS PAGE