



Box 16, Site 17, RR 1
De Winton, AB, T0L 0X0
(403) 818 0395

Order Form

Description	Qty.	Price	Subtotal

Contractor Discount	_____
Sub Total	_____
GST	_____
Total	_____

Name _____

Company _____

Address _____

Phone _____

Method of Payment

- Check
- Invoice Net 15 days



By signing this document you agree to all of the terms and conditions and further agree to pay the above amount. Overdue accounts are subject to a 2% per month charge.

Signature _____

Date: _____