RECYCLABLE

COMPANY NAME

ADDRESS
ADDRESS
ADDRESS

TO	DATE 20
ADDRESS	PHONE
POSTAL CODE	PHONE EVNG.

QUANTITY	DESCRIPTION	AMO

CLER	CASH ☐	CHEQUE ☐	DEBIT CARD ☐	PURCHASES	
C.O.D. ☐	MD ED ☐	PAID OUT ☐	VISA ☐	M-C ☐	AMEX ☐	ON ACCT. ☐	G.S.T./H.S.T.	
TERMS				SUB-TOTAL	
				P.S.T.	
RECEIVED BY				TOTAL	

PROOF

QE 92-03

AB 000001