

Order FORM

Order ID: _____

Order Date: _____

Promise Date: _____



CUSTOMER INFORMATION

Name: _____ Contact No: _____

Email Address: _____

Delivery Address: _____

ITEM	DESCRIPTION	QTY	PRICE	AMOUNT
TOTAL				

DELIVERY:

Date: _____

Start Time: _____

End Time: _____

Venue: _____

PAYMENT:

- ☐ Cash
- ☐ Paypal
- ☐ Card
- ☐ Bank transfer
- ☐ Other

AMOUNT:

Subtotal: _____

Delivery: _____

Deposit: _____

Grand Total: _____