Customer Order Form

Customer Name: _____

Delivery Address: _____ Date/Time: _____

_____ Order Number: _____

Contact Name: _____ Contact Number: _____

Packing Slip No:

Courier Service: ☐ Ring When Ready ☐ Pick Up ☐ Bonds ☐ Riteway ☐ Capital Ex ☐ Sales Rep ☐ K&B

Type	Product Code	Gloss Level	Quantity	Product Description	Product Source	Colour Number	Prev. Job# or TMP?

Gloss Level Key:

- **FG** - Full Gloss (100%)
- **SG** - Semi Gloss (60%)
- **S** - Satin (30%)
- **M** - Matte (10%)
- **Special** - Please Specify %

Comments: _____

_____