

GENERAL ORDER FORM						
Invoice to name		Ship to				
Mailing address			Street address (please do not use post office box)			
City	Province	e Postal code	City		Province	Postal code
Ordered by			Attention			
Phone		Email	Phone			
Date ordered		Date required	Email			
Payment C	Cheque	Purchase order #	VISA	Debit	Mastercard	AMEX
Credit Card No.	Expiry date	Cardholde	r's name			
		Cardholder's signature				
In person, we also accept debit and cash.						
Free standard shipping within Canada (some exclusions apply). Taxes extra. Express delivery extra.						
QUANTITY CODE			TEM		PRICE	TOTAL
					SUBTOTAL	
					SHIPPING	
					TAX	
					TOTAL	