



FAX ORDER FORM

PLEASE PHOTOCOPY BEFORE USE

ORDER BY PHONE: (416) 297-8220	FAX YOUR ORDER: (416) 297-7459
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DATE: _____

CUSTOMER INFORMATION

COMPANY:		SHIP VIA:
P.O. #	CONTACT:	P.P./P.P. & CH./COLLECT
TEL #	FAX #	DATE REQUIRED:
SOLD TO:		SHIP TO: (IF DIFFERENT FROM SOLD TO ADDRESS)
PROVINCE: POSTAL CODE:		PROVINCE: POSTAL CODE:
SPECIAL INSTRUCTIONS: _____		

ORDER DETAILS

ITEM #	ITEM DESCRIPTION	QUANTITY	UOM	UNIT PRICE	TOTAL PRICE
				SUB-TOTAL	
				GST/HST	
				PST/QST	
				TOTAL	