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Date: _____ Order Required By: _____ Purchase Order No.: _____

Quantity	Item Number	Description (colour, if applicable)	PG #	Price Each	Total Price

SHIPPING INFORMATION			
Loading Dock Available?	<input type="radio"/> YES	<input type="radio"/> NO	<input type="radio"/> MAYBE
Substitution of Product Allowed?	<input type="radio"/> YES	<input type="radio"/> NO	<input type="radio"/> MAYBE
<input type="radio"/> Cheque	\$ _____	Cheque # _____	
	Amount		
<input type="radio"/> Credit Card (check one)	<input type="radio"/> Visa	<input type="radio"/> MasterCard	
_____	Account Number	_____	Expiration
_____	Signature	_____	3 Digit CVC Code

<p>Click here to clear all order entries</p> <p><i>*PST where applicable</i></p> <p><i>**Shipping costs will be evaluated at time of purchase.</i></p>	Total Order	_____
	GST or HST	_____
	PST*	_____
	Shipping**	_____
	Total	_____

Notes/Comments:

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