



JO-DA BONSAI DISTRIBUTORS

Suppliers of BONSAI and accessories.

ORDER FORM

ORDER NO:

DATE:

CUSTOMER NAME:

POSTAL ADDRESS: DELIVERY ADDRESS:

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CONTACT NAME:

PHONE No.: CELL No.:

Item/Code	Description	Qty	Unit Price	R c
TOTAL				

Delivery, Postage/Courier and Packaging will be charged once weight and size of package ascertained.
 Method of Payment: Direct Deposit or Internet Payment(Banking details available on acceptance of order):

Delivery or Collect:

Delivery/Collection Date:

Signature:

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