



YOUR COMPANY'S NAME

Your Company's Address Line 1
Your Company's Address Line 2
Your Company's Tel. and Fax Number

DELIVERY NOTE

ORIGINAL

D. N. No.: INV-1
Customer Code: 1000011001

D. N. Date: 8 OCT 1998
Salesman Code: 1000000010

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Billing Customer:
A/R - Client A
Client A Address

Delivery To / Shipment Details:
A/R - Client A
Client A Address

Contact Person:
Mr. Kent

Contact:
Mr. Kent

Tel. / Fax:
1234-5678
5678-1234

Number:
1234-5678
5678-1234

Our Ref.:

Your Ref.:

Item Code	Description	Quantity	Unit	CHECK	
1000010001	Stock Item 1 stock item 1 description description line number 3 stay here description line number 4 stay here description line number 5 stay here description line number 6 stay here description line number 7 stay here and so on.....		1PC.		
3000010010	Stock Item 3		1Set		

Remarks:

Large empty box for Remarks.

YOUR COMPANY'S NAME

Authorised Signature(s)

A/R - Client A

Authorised Signature(s) & Company Chop