|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Customer | {ClientName} |  | Pick List Date | {CreatedAt} |
| Address | {DeliveryLocation} |  | Pick List Number | {PickListNumber} |
| City | {ClientAddress} |  | Invoice Number |  |
| Attention | {ClientContactName} |  | Invoice Date |  |
| Phone | {ClientPhone} |  | Sales Representative | {SaleName} |
| Cellphone | {ClientContactMobile} |  | PO No | {PurchaseId} |
| Fax |  |  | PO Date | {PurchaseDate} |
| Email | {ClientEmail} |  | Job order no | {JobOrderNumber} |
|  |  |  | Number of Cartons |  |

|  |  |  |  |
| --- | --- | --- | --- |
| # | Product Code | Description | Qty |
| {#Products}{Number} | {ProductCode} | {Description} | {Qty}{/Products} |

|  |
| --- |
| **Smart Vision Solutions Terms and Conditions:** |
| * Notice must be given to us of any goods not received within 1 day taken from the date of dispatch stated on invoice. |
| * Any Shortage or damage must be notified within 24 hours of receipt of goods. |
| * Complaints can only be accepted if made in writing in same days of receipt of goods. |
| * No goods may be returned without prior authorization from company |
| * As per Smart Vision Solutions Policy * Delivery to the site location in Riyadh |



Signature Of Shipper Or Customer’s Agent

----------------<< End of Pick List >>-----------------

Signature of Smart Vision Solutions