

201577

ORDER INFO	customer's order no.		phone	date 2-26-21	
	name				
	address				
	city, state, zip				
	sold by		cash <input type="checkbox"/> charge <input type="checkbox"/> check <input type="checkbox"/> c.o.d. <input type="checkbox"/> on acct. <input type="checkbox"/> # _____		shipping information

quantity	description	price	amount
1	angel med.		13.00
2	snails		7.00
3	1 glo-tetra		8.95
4			30.95
5			2.48
6			33.43
7			33.43
8			
9			
10			
11			
12			
13			
14			
15			
16			

received by _____