

For :

Return Order No :  
Date :

Inv. Ref No :

Date :

PO Date :

Delivery	1.		ex W/house(P/C/D)	2.		Franco(P/D)	by		Freight charge:
Payment	1.		COD	2.		Prepaid	3.		Free/TO/LF/RP/PT
	5.		Within    days after	5a.		SJ/Inv/FP/Tender	5b.		for the Month/Week(M/W)
	by 1)		Cash	2)		Check	3)		Giro
			by			by			by

Remark :
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Received By

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Name / Signature