

Cantex Distribution Inc.

4749 Park Street Niagara Falls ON L2E 2P7
TELE: (905) 374-3121 FAX: (905) 374-8231

P.O. NUMBER:

P.O. DATE:

PURCHASE ORDER FORM

BILL TO INFORMATION

Company _____
Address _____
City _____
State/Province _____ Zip/Postal Code _____
Country _____
Phone Number _____
Fax Number _____
Contact Name _____

SHIP TO INFORMATION

Company _____
Address _____
City _____
State/Province _____ Zip/Postal Code _____
Country _____
Phone Number _____
Fax Number _____
Contact Name _____

ITEM NO.	DESCRIPTION	QUANTITY	UNIT PRICE	AMOUNT
Terms and Conditions:		SUBTOTAL		
		GST/HST		
		PST		
		SHIPPING		
		TOTAL		

CREDIT CARD INFORMATION

VISA MASTERCARD AMERICAN EXPRESS

Card Number:
Expiry Date:
Name on Credit Card:

Purchase Order Authorized By

Credit Card Authorized By

PLEASE FILL OUT, PRINT, SIGN AND FAX THIS FORM TO CANTEX DISTRIBUTION INC.