



# SALES ORDER ENTRY FORM

PROJECT NAME: \_\_\_\_\_

QUOTE # / REV.# \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**REP INFORMATION:** \_\_\_\_\_

REP Company Name: \_\_\_\_\_

REP Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Address: \_\_\_\_\_ Email: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

REP Authorisation (signature)

\_\_\_\_\_

Date:

dd mm yy  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**CONTRACTOR INFORMATION:** \_\_\_\_\_

Contractor Company Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Address: \_\_\_\_\_ Email: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**ADDITIONAL INFORMATION:** \_\_\_\_\_

Engineer Firm Name: \_\_\_\_\_ Contact Name: \_\_\_\_\_

Bld Name: \_\_\_\_\_ Job Location: \_\_\_\_\_

**SALES INFORMATION:** \_\_\_\_\_

Total Order Amount:

\_\_\_\_\_

CDN

US

P.O. Attached

P.O. to Come

Invoice REP

Quotation Sheet Attached

Freight Allowed

Invoice Others (Contractor)

Parts Supplied by Others (Info. to Follow)

Freight by Others

Commission Statement Form Attached

**EXPECTED SHIPPING DATE:** \_\_\_\_\_

Month:

\_\_\_\_\_

or Quarter:

\_\_\_\_\_

Year:

\_\_\_\_\_

**INTERNAL USE ONLY**

Sales Director/RSM Signature:

\_\_\_\_\_

Date

Mo

Dy

Yr

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_