



[ORDER FORM]

Order Date: _____/_____/_____(d/m/y)

Pick-up Date: _____/_____/_____

Name: _____

Address: _____

H. Tel.: _____

W. Tel.: _____

Please ensure there's a contact number in case we need to inform you of quantity limitations due to unforeseen circumstances.
Thank You!

Quantity	Size/Unit	Description	Unit Price	Total
Total:				

Cherryvale Organic Farm

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