**ORDER FORM**

|  |  |
| --- | --- |
| **Order no:** |  |
| **Name:** |  |
| **Address:** |  |
| **Email:** |  |
| **Phone:** |  |
| **Date:** |  |

|  |  |  |
| --- | --- | --- |
| No | **DESCRIPTION** | **QTY Quantity or kg** |
| **1** |  |  |
| **2** |  |  |
| **3** |  |  |
| **4** |  |  |
| **5** |  |  |
| **6** |  |  |
| **7** |  |  |
| **8** |  |  |
| **9** |  |  |
| **10** |  |  |

**DELIVERY**

|  |  |
| --- | --- |
| **Shipping by Ship port CIF** |  |
| **Truck CIF** |  |
| **DHL additional costs apply** |  |
| **FEDEX additional costs apply** |  |
| **or other choice from you**  |  |

|  |  |
| --- | --- |
| **Delivery recipient** |  |
| **Address:** |  |
| **Delivery country** |  |
| **Phone:** |  |
| **Date:** |  |

**We will get back to you with a quote.**

**Scangate. Group Ltd**

**email: scangate.pharmacy@gmail.com**

**homepage https://www.scangategroup.com**

**Phone: +46762478222**