



CLIENT'S INFORMATION:			
Company			
Attention		Title	
Address			
Address			
City		Province	Postal Code
Phone () ()		Fax () ()	
Email @			

SHIP TO DETAILS:			
Company			
Attention		Title	
Deliver to Address			
Deliver to Address			
City		Province	Postal Code
Phone () ()		Fax () ()	
Email @			

SELECTIONS: (Please be sure to include complete information below.)					
Quantity	Product Number	Description	Variety Selection	Unit Price	Total Price

*Please contact our office for quantity discounts.

Payment Information	
Make cheques payable to: <i>Martins Family Fruit Farm LTD.</i>	
Method of Payment: <input type="checkbox"/> Cheque Enclosed <input type="checkbox"/> Charge my credit card Purchase Order #: _____	Bill Credit Card <input type="checkbox"/>  <input type="checkbox"/>  Exp. Date: _____ Acct. # _____ Three Digit Code _____ Signature _____ (Order must be signed)

Shipping and Handling charges are additional.



Shipping/ Handling	
SUBTOTAL	
Add GST/HST Add Ontario/ Quebec Tax	
TOTAL*	

We appreciate this opportunity to serve you!



Packed By / Embalee Par:
Martin's Family Fruit Farm
 1420 Lobsinger Line, RR#1
 Waterloo, Ontario, N2J 4G8
 www.MartinsApples.com



Fax order to: **519.664.1505**
 For any questions or concerns
 Call us at: **519.664.2750**
 Toll Free: **800-461-2391**
For Your Family, Pick Freshness!