

Delivery Note

Baja Shades

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Invoice Address
Mrs.DIANA ROJAS CLINICA TORRE 21 Calle: TORRE 21 , Numero: 405 ZONA RIO TIJUANA

Delivery Address
Mrs.DIANA ROJAS CLINICA TORRE 21 Calle: TORRE 21 , Numero: 405 ZONA RIO TIJUANA

Job Ref No	Date	Invoice Date	Invoice No	Cust Ref.
DIC1376	12-02-2026			BS 251212 A

Product Name	Description
Ripplefold Drapery	Unit Type: Inches, Cantidad: 1, Window name: CABINA 4, Stack Direction: PNL, Drapery Type: Unlined Drapery, Fullness: 220
Ripplefold Drapery	Unit Type: Inches, Cantidad: 1, Window name: CABINA 3, Stack Direction: PR, Drapery Type: Unlined Drapery, Fullness: 220
Ripplefold Drapery	Unit Type: Inches, Cantidad: 1, Window name: CABINA 2, Stack Direction: PR, Drapery Type: Unlined Drapery, Fullness: 220
Ripplefold Drapery	Unit Type: Inches, Cantidad: 1, Window name: CABINA 1, Stack Direction: PNL, Drapery Type: Unlined Drapery, Fullness: 220

Customer Name (Printed): _____ Customer Signature: _____ Date : _____