



Delivery Address: .....

City:.....

Phone : .....

Fax No:.....

**Note:**

I hereby declare that, I agreed with the terms and conditions as given in the distribution form and provide a post dated cheque of billed amount at the time of receiving the goods.

Cheque No:..... ,.....

Dated:.....

Marketing Person:.....

Contact No.:.....

Signature.....

**(Authorised Signatory)**