**SERVICE ORDER FORM**

|  |
| --- |
| **Customer Details and Address:****[Retail Partners]****P.O. Box []****Kigali-Rwanda****Tel: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****Email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| **Product(s)**

|  |  |
| --- | --- |
|  | **[Product Name]** |
| Wholesaler Price VAT inclusive | [RWF …………] |
| Retailer Price VAT inclusive | [RWF **…………..]** |

 |
| **For KTRN Ltd**Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Name: Designation: Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Place: Kigali, Rwanda  | **For [Retail Partner]**Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Name: []Designation: []Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Place: Kigali, Rwanda  |