**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 |