Filing Efficiency Centre
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FAX ORDER FORM - PLEASE FAX TO: *08 8297 0537*

INVOICE TO:

Name:

Customer Code:

Delivery Address:

Suburb: Postcode:

Phone:

Fax :

Email:

Purchase Order No:

Ordered By:

Signature:

Collection/Delivery: (please tick)

Please Courier: ☐

Goods will be collected ☐

Dispatch Via:

PRODUCTS ORDERED:

PRODUCT CODE	DESCRIPTION	QUANTITY

Thank you for your order - We appreciate your business

Invoice To: (Please tick appropriate box)

☐ Please Invoice my Account

☐ I will pay cash on collection

☐ Please charge my credit card VISA MASTERCARD

Please Advise Invoice Value ☐

Telephone Enquiries Welcome on 08 8371 0009