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| * Refer to notes on page 3. Page 1 of 3 | | | | | | | | | | | | | | | | | | | | | | |



ORDER FORM

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ORDER FORM



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| | | I ICase | JUICUL | preferreu | pay | ment. |

CHEQUE

Please enclose a cheque made payable to "Shearwell Australia" for the total order amount and post with the completed order form.

CREDIT CARD

TIME: AM PM

Please DO NOT email/fax your Credit Card details. We will call you to get your details to process your order. If you have a preferred time to be contacted please write in box above or call us on 1800 998 934.



EFT When we process your order we will send you a Proforma Invoice with direct deposit details to make your payment. Your order will be finalised once payment is received.

CONTACT DETAILS:

| MAIL: | Shearwell Australia Pty Ltd. |
|--------|---|
| | 33 Piper Road |
| | Bendigo VIC 3550 |
| PHONE: | 1800 998 934 (8.00am-5.00pm Monday-Friday, excluding public holidays) |
| FAX: | 1300 977 843 |
| EMAIL: | orders@shearwell.com.au |
| | |

NOTES:

*OJD Status & Tag Label:

| If you would like a V or T printed on the tag, please state in the tag layout on previous page. If this is left blank we will not print an OJD status on your tag. | | | | | | | |
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| or assistance in filing out this order form, please contact one | | | | | | | |
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