

# ORDER FORM



Order Date: \_\_\_\_\_

## CUSTOMER DETAILS

Title: \_\_\_\_\_ First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_

Suburb: \_\_\_\_\_ State: \_\_\_\_\_ Postcode: \_\_\_\_\_

Country: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Comments: \_\_\_\_\_

## ORDER DETAILS

Code No.	Description/Design	Unit Price	Qty	Total
		\$		\$
		\$		\$
		\$		\$
		\$		\$
		\$		\$
		\$		\$
		\$		\$
		\$		\$
		\$		\$
		\$		\$

Postage and packing charge: Will be calculated on receipt of order

Postage	\$
<b>Grand Total</b>	<b>\$</b>

## PAYMENT DETAILS

Payment type:  Cheque  Bankcard  Mastercard  Visa

Name on Card: \_\_\_\_\_

Card No.: \_\_\_\_\_ Expiry Date: \_\_\_\_\_ / \_\_\_\_\_

Signature: \_\_\_\_\_

Please complete the order form and post or fax to:

**Times Past Furniture**

**141 Wallace Street, Braidwood NSW 2622 Australia**

**Phone/Fax + 61 2 4842 1722 Email [sales@timespastfurniture.com.au](mailto:sales@timespastfurniture.com.au)**