PURCHASE ORDER

THERMAL ELECTRIC ELEMENTS AUSTRALIA

Company Name:_____

Order Number:_____

Bill To:

_____
_____
_____
_____

Ship To:

_____
_____
_____
_____

Fax this completed order form to:
1800 631 235

Quote reference (if applicable):_____

Quantity	Part No.	Description	Unit Price	Total Price

Subtotal	
Freight	
GST	
TOTAL	

Please send goods via:

☐ Our transport as below ☐ Your transport at cost

Carrier:_____

Account no:_____

Contact Details

Name:_____

Ph:_____

Fax:_____

Mob:_____

Delivery required by:_____

OFFICE USE ONLY

Approved by:_____ Design:_____

☐ O/N
☐ Acct/Payment
☐ P/sheet no:
☐ Part no:
☐ Description:
☐ Price
☐ Quantity
☐ Freight
☐ Desp Date
☐ Del Address

Payment Details

☐ We have an account
☐ Please send bank details for EFT
☐ We will send a cheque
☐ Please debit our credit card:

Card number: _____

Card type:_____

Name on card:_____

Expiry Date:_____