Order Form

ABN: 35 503 115 304

Tel: 0438 534 604
Fax 03 8080 1723

Attention: Paul Beaver

Please Print Clearly ***Date of Order:*** *_ _ / _ _ / 2009*

Customer / Company Name:		**Total**
Shipping Address:		
Contact Phone Number:		
E-mail Address:		
Number of Kits Requested:		
Price per Kit (15 Genes Tested):	$ 409.00 + 40.90 GST = **$449.90 / kit**	
Please add $10.00 for postage & handling	**$10.00**	
Total Price (including GST):		

- For Payments by ***CREDIT CARD*** please fill out the details below & send this form via FAX , **03 8080 1723,** or MAIL to **Key Skills Pty Ltd, PO Box 3120, Mentone East, VIC, 3194**

CREDIT CARD PAYMENT DETAILS

Credit Card Type: ☐ Visa ☐ Mastercard

Credit Card No:

Credit Card Holder (Name on Card):

Expiry Date: _ _ / _ _

Amount:

Authorised Signature: **Date:**

- For Payments using ***ELECTRONIC DEPOSIT*** tick here ☐
  - FAX Order to **(03) 8080 - 1723**
  - Deposit Payment to the Following Account:

ANZ Bank: Braeside, VIC, 3195
BSB: 013 233
Account Number: 1997 31512
Account Name: Key Skills Pty Ltd
(Please identify the payment using your Customer / Company Name given above)

- For Payments by ***CHEQUE*** please mail with order form to the above address.