

# Customer Order Form

# SoftMats

Melbourne Australia - New Zealand

ABN 20 373 165 662

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

## Customer Details

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 \_\_\_\_\_  
 Suburb: \_\_\_\_\_  
 Postcode: \_\_\_\_\_  
 State: \_\_\_\_\_  
 Country: \_\_\_\_\_  
 Phone: \_\_\_\_\_  
 Email: \_\_\_\_\_

## Delivery Details

*Same as Customer*

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 \_\_\_\_\_  
 Suburb: \_\_\_\_\_  
 Postcode: \_\_\_\_\_  
 State: \_\_\_\_\_  
 Country: \_\_\_\_\_  
 Phone: \_\_\_\_\_  
 Email: \_\_\_\_\_

Item Description	Qty	Price	Total
Please ADD your Postage and Handling accordingly			
Australia Wide PER UNIT \$10			
	TOTAL inc GST		

I enclose my Cheque/Money Order made payable to 'Softmats Pty Ltd'

I wish to pay by Credit Card

VISA

MASTERCARD

Cardholder Name: \_\_\_\_\_

Credit Card Number: \_\_\_\_\_

Expiry \_\_\_\_\_ / \_\_\_\_\_

Signature \_\_\_\_\_

By signing you are confirming you have read the terms and conditions displayed on our website at [www.softmats.com.au](http://www.softmats.com.au), and that you are the holder of the above listed Credit Card further authorising the debit of the above 'TOTAL inc GST' amount only from this Credit Card by JKSM Softmats

**Send**  
Completed order and Payment to:

Softmats Pty Ltd  
 PO Box 4235  
 Dandenong South VIC 3164  
 Australia

**Enquiries**  
Fax completed Credit Card order to:

Fax +61 (0) 3 9701 5287  
 Tel +61 (0) 3 9701 5339

Office use only

Received: \_\_\_\_\_

Officer:

Order No: \_\_\_\_\_

Dispatched: \_\_\_\_\_