

ORDER FORM

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Rep South Africa
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NAME: DATE.....
 ADDRESS..... TEL.....
 FAX

..... CODE EMAIL

QUANTITY	CATALOGUE NUMBER & NAME	PRICE

Please make a direct deposit.
 No cash please or add R30 to
 cover cash deposit fee.

Sub-total R

Courier 15% R
 Or wait for quote

Packing & R 60.00
 Handling

Signature:..... **Total** R