catalogue order form

fax to 02 **9266 0969**
email to **sales@ikecho.com.au**

ACCOUNT HOLDERS

Company Name: _____

Contact Name: _____ **Phone: (** **)** _____

NEW CUSTOMERS

C.O.D for Non-approved account holders. A credit application will be sent to you to open up an account, once approved, 30 day account will apply.

Company Name: _____ **Buying Group #** _____

Contact Name: _____ **Phone: (** **)** _____

Qty	Ikecho Code	Description	Price (Ex. GST)
		Postage	**$12.00**
		Sub Total (Ex. GST)	

PAYMENT METHOD (please circle) *CHEQUE • CREDIT CARD • DIRECT DEPOST*

DIRECT DEPOSIT

Ikecho Pearl Company Pty Ltd

BSB: 032 014

A/C #: 18 6156

CREDIT CARD

Name on credit card: _____

Card No: _____ **Exp:** _____

Signature: _____