

AACMA PRODUCT ORDER FORM

Please post or email your order to: Suite 6A, 50-56 Sanders Street UPPER MOUNT GRAVATT QLD 4122 Email aacma@acupuncture.org.au

ABN: 52 010 020 390

DATE

| ITEM | UNIT PRICE | QUANTITY | EXTENDED PRICE |
|---|---------------|----------|-------------------|
| Receipt Book – 200 receipts (if not registered for the GST) (TEMPORARILY | \$20.00 | | |
| OUT OF STOCK) | | | |
| A5 Tax Invoice/Receipt Book – 200 receipts (if registered for the GST) (TEMPORARILY | ¢30.00 | | |
| OUT OF STOCK) | \$20.00 | | |
| Sickness Certificate Pad (pad of 50 certificates) | \$4.00 | | |
| Window Decal (single) | \$5.50 | | |
| Window Decal (pack of 2) | \$10.00 | | |
| OPTIONAL EXPRESS POSTAGE (NEXT DAY DELIVERY – METROPOLITAN AREAS ONLY) | \$7.00 | | |
| POSTAGE FOR UP RO 2 SICKNESS CERTIFICATE A5 ENVELOPE | \$3.00 | | |
| PLUS POSTAGE AND HANDLING FOR UP TO 5KG | \$20.00 | | |
| Items can be returned within 28 days for a refund or exchange as long as it is returned in a new condition with original proof of purchase. AACMA will not be liable for any loss or damage that may occur by third parties | | | |
| TOTAL (ALL PRICES INCLUDE GST) | | | |
| | | | |
| Name Member Number | | | |
| Please find enclosed cheque/money order made out to AACMA OR charge my credit card in accordance with the details below: | | | |
| ☐ Visa/MasterCard ☐ BPAY Amount to be deducted \$ | | | |
| Name of Card Holder: | | | |
| Card Number:/ | | | |
| | | | |
| OFFICE USE ONLY | | | |
| ID TYPE F AF M P G S | CU CHM F | IN 🗖 PI | ☐ FAC |