

Product Order Form (2008)

Customer Information

Your Name: _____ Title: _____ Email: _____
 Company Name: _____ Street Address: _____
 City: _____ State: _____ Post Code: _____ Country: _____
 Recipient Name & Delivery Address (if different): _____
 _____ Tel/Fax: _____

Order Details

Preferred Currency (circle one): **USD / ERU / AUD / GBP**

Product Name & PN	Description and Options	Qty.	Unit Price	Amount

Sub-Total: _____ **GST (Australian Customers Only):** _____

Total Amount of Ordered Products: _____

Shipping

- By Freight Collect (your own account): Name of Courier _____ Your Account No. _____
- Shipping by us: Using DHL/UPS/Fedex Using EMS Using registered post
- Other _____ (Please specify)

Total shipping cost shown on checkout page on www.oemarket.com: _____ *

*Note: you can leave this item blank if you are not sure on the shipping cost. We will advise you the cost after receiving your order.

Payment

- Direct transfer (T/T) – Our account number will be provided in the proforma invoice after receiving your order form.
- Credit Card (Using this payment your order will be processed in Australian Dollar under current exchange rate.)

Name of the Card Holder: _____ (Print)

Card Number: _____ Type: MasterCard VISA

Expiry Date: _____ / _____ (MM/YY) Signature: _____ Date: _____

Additional Comments _____

Please fax the complete order form to **(61 2) 9871 0261**. (Note: this form is valid until Jan 1, 2009).