dbs product order form

DBS Medical Supplies ABN 16 075 604 438

T: (02) 6685 5599 or 1800 626 692 **F:** (02) 6685 5546 **E:** dbs-info@dbsmedical.com **W:** www.dbsmedical.com

Please complete this form and email it to dbs-sales@dbsmedical.com or fax it to (02) 6685 5546.
Please keep a copy for your records.

Contact Name _____

Company Name _____

Contact Telephone _____ Contact email _____

Street Adddress _____

Suburb _____ State _____ Postcode _____

Order Number _____ Date of Order _____

Code	**Product Name**	**Size** if applicable	**Colour** if applicable	**Quantity**

Please complete this section if you would like to pay by Credit Card.

Please charge my: VISA ☐ MasterCard ☐ for this order, a tax invoice will be sent to you prior to funds being debited.

Card No. _____ _____ _____ _____ CCV No. _____
(The last 3 digits on the reverse of the Card)

Name on Card _____ Expiry Date _____

Signature _____

DBS medical supplies

Trading Terms: All invoices are due and payable within 30 days from the date of invoice. Prices are shown EXCLUDING GST and are correct at time of printing. Prices are subject to change without notice. Payment can be made by cheque or electronic funds transfer. Payment by credit card is acceptable at time of ordering and for current invoices only. We accept Visa & Mastercard. Please call us first for approval of returned goods. Claims must be made within 14 days of invoice. We will not credit any freight charges for returned goods. Special orders of non-stock items will not be accepted for return or credit. Orders over $400 excluding gst will be delivered freight free in Australia using our carriers. Orders less than this will incur an $8 plus gst fee. Freight charges will apply to equipment and orthotic materials depending on size, weight and destination. We take every care to describe products accurately but descriptions and specifications may change form time to time. Please satisfy yourself that a product meets your needs.