



déseo

DESEO ORDER FORM

POST: DESEO, 289 Parramatta Rd, Leichhardt NSW 2040 Australia
FAX: (61) +2_8080 8336

Name _____

Address _____

Telephone _____

STYLE	QTY	SIZE	WIDTH of foot	LENGTH of foot	PRICE \$AUS	COURIER	TOTAL
						\$10	
						\$10	
						\$10	
TOTAL							

DESEO
289 Parramatta Road
Leichhardt NSW 2040 Australia
www.deseo.com.au

PAYMENT METHOD

CHEQUE

Payable to: DESEO PTY LIMITED.

Please include your name, address and telephone number on the back.

CREDIT CARD

Please debit the following credit card (please circle):	VISA / MASTERCARD / AMEX
Today's date:	
Invoice amount:	
Customer name:	
Name on card: (please print)	
Card number:	
Expiry date on card:	
Signature of cardholder:	
VISA / Mastercard: Enter last 3 characters on the signature panel	
AMEX: Enter the 4 characters above your card number	

Additional Identification check:

This is required to help prevent and minimise credit card fraud. All Information on this form will remain private and confidential, and will not be disclosed to third parties.

Name on card (please print):

Drivers Licence Number: _____

OR

Medicare card number: _____

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