



déseo

DESEO ORDER FORM

POST: DESEO, 474 Oxford Street, Paddington NSW 2021 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	

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: _____