WHOLESALE & INDUSTRIAL SUPPLIES LTD.

www.wiswis.co.nz

HAMILTON
49 King Street
Tel: 07 846 0328
Fax: 07 846 0250
wisham@xtra.co.nz

MT MAUNGANUI
58 Newton Street
Tel: 07 574 2631
Fax: 07 574 2632
wisbop@xtra.co.nz

GOODS ORDER FORM

DATE: ___ /___ /___

POSTAL ADDRESS:

Company: .....

Address: .....

Suburb: .....

Town/City:.....

Phone: ( )

Email: .....

Purchase Order No:.....

Ordered by:.....

Signature:.....

DELIVERY ADDRESS:

Company: .....

Address: .....

.....

Suburb: .....

Town/City:.....

MY ORDER:

CODE	PRODUCT DESCRIPTION	QUANTITY

MY PAYMENT DETAILS:

☐ Please invoice my account

☐ I have direct credited to the WIS bank account: **02-0316-0150267-000**

☐ Please charge my credit card *(details below)*

CREDIT CARD DETAILS:

☐ Mastercard ☐ Visa ☐ American Express

Card No: | | | | | | | | | | | | | | | | |

Cardholder's Full Name: .....

Expiry Date:.....

Cardholder's Signature:.....

(Please photocopy for future use)