Order Form 10/11

Retain this page - please photocopy

Date: ___/___/___

LOTE Teaching Aids

Your Name: _____
(Your order will be attentioned to this person/department on disptach)

SCHOOL: _____

School Postal Address: _____

☐ Please Tick Box if this is your home address

State: _____ P/code: _____

Phone: ( ) _____
Including Area Code

Fax: ( ) _____
Including Area Code

SCHOOL ORDER No: _____

Please provide your school order number so we may quote it on your school's invoice.

PAYMENT DETAILS

Payment on invoice (SCHOOLS ONLY) ☐ Payment enclosed (In Australian dollars) ☐

Payment by credit card ☐

Please debit my Visa / Mastercard

Cardholder Name: _____

Credit Card No:

Expiry Date: __/__ Signature: _____

Qty	Code No.	Language	Size	Product description/title	Price	Total

Send to:
LOTE Teaching Aids
PO Box 733, Kalamunda
Western Australia 6926

ABN: 28 597 791 572

Ph: (08) 9456 4126

Fax: (08) 9456 4148

SPECIAL DISPATCH NEEDED?
If you have requirements for this order, a special event/day or you school is closing for holidays, please specify date below so we can dispatch to suit.

PLEASE DELIVER BEFORE/AFTER

____/____/____

Reason _____

Postage and Handling

PLEASE NOTE: All prices include 10% GST

Order Total	Australia *(inc GST)*	New Zealand
Up to $50	$3.85	$10.00
$50 - $100	$6.60	$15.00
$100 - $200	$11.00	$20.00
$200 - $500	$16.50	$30.00
$500 +	$22.00	$60.00

Total of Order	
Postage & Handling	
TOTAL	

PLEASE NOTE: We reserve the right to correct prices and postage if incorrectly applied without giving prior notice.