



Easy Order Form

FAX: 5564 5270

Factory 5/694 Ashmore Road Ashmore 4214 Tel: 07 5597 5379 www.inknow.biz

Company Name _____

INA_ _ _ Account Number if known

Contact Name _____

Telephone _____ Delivery Address _____

Simply write your printer make and model or cartridge numbers, qty required on the form and fax it through to us

Printer Make	Printer Model	Cartridge #	Quantity Required
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Please tick

Goods to be delivered

Order to be collected

Payment Method

Direct Bank Deposit (EFT)

Credit Card

Cheque

Receipt/Invoice to be:

Sent/collected with goods

Emailed _____