

PURCHASE ORDER #GR190504

DATE: _____ HOUR: _____ FAX No: _____ SENDER: _____

PRODUCTS YOU ARE BUYING:

AR180903A/ASM	1 pce	\$162,00
<u>Airmail shipment</u>		<u>\$8,00</u>
	total:	\$170,00

SHIPMENT: 3-5 working days after receipt of this order form

NAME AND ADDRESS OF CARDHOLDER/DELIVERY ADDRESS

The name and address details below MUST be the filled in exactly the same as for your credit card. These details may be checked when validating your credit card.

NAME: _____

Street Address _____

City & Country & Zip _____

Telephone No. & Fax No. _____

e-mail: _____

Best time for contact: _____

CREDIT CARD DETAILS:

Card type: _____ Eurocard/Mastercard _____ Visa _____

Name of the issuer: _____

The details below are to be filled in using a PEN on the printed copy, as these details are NOT to be send via Internet.

Card Number: _____ valid to _____ / _____

CVC code: _____ (last three digits on the back of your card in upper right corner or the signature area)

I wish to order the above named items. The address above matches the credit card.

I'm using my credit card according to the agreement I have with the credit card company.

Today's date: _____ Signature: _____

P.S. Remember to FAX +359-32-621270 or +359-32-267612 this form to the merchant OLIMEX Ltd. correctly signed.