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| **Business/Customer Name** |  |
| **Address** | # & Street | Town/City | Postcode |
| **Contact Numbers** | Business | Home | Mobile | ABN (where applicable) |
| **Email Address** |  |
| **Contact Person** |  |
| **Shipping Address***(if different from Business/ Customer Address)* |  |

**ORDER FOR QUALITY CRAFTS**

Please supply the following items

| **Code** | **Description** | **Qty** |
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| Authorised Person | Signature |  / /Date |
| Print Name |  |

On completion of this form, please email to graham.qualitycrafts@gmail.com. If you have any questions, please phone 0417 072 627.