ORDER FORM

PHONE
0845 1300 616

EMAIL
info@oms.uk.com

Ordered by:
Company: _____

Name: _____

Address: _____

_____

_____

County: _____

Postcode:

Deliver to:
Company: _____

Name: _____

Address: _____

_____

_____

County: _____

Postcode:

Contact: _____ Telephone: _____

Fax: _____ Purchase order No: _____

Please note: Orders will NOT be processed without a Purchase Order number

PAGE	PRODUCT CODE	DESCRIPTION	UNIT	QUANTITY	PRICE
		Please note that there is a delivery charge for orders under £45		Delivery Charge	**£6.99**
				Please add VAT	
				Discount (if applicable)	
				TOTAL	

We accept all major credit cards

Please refer to OMS for payment terms & conditions

Card Type	VISA ☐	MasterCard ☐	American Express ☐	Switch ☐	Switch Issue No: ☐☐
Name as it appears on the card					3 Digit Security No: ☐☐☐
Card Number	☐☐☐☐ ☐☐☐☐ ☐☐☐☐ ☐☐☐☐			Expiry Date	☐☐/☐☐
Please debit my card £		Sign		Date	
Cheque	Cheque enclosed for £				