

NSW Stoma Limited

ABN 51 610 218 338



Parcel Delivery Order Form

Please send orders by:

Email: orders@nswstoma.com.au
Fax: (02) 9565 4317
Post: NSW Stoma Limited, PO Box 164
 Camperdown NSW 1450

All correspondence to: NSW Stoma Limited
 PO Box 164, Camperdown NSW 1450

Unit 5, 7-29 Bridge Road, Stanmore NSW 2048
 Tel: 1300 678 669 / (02) 9565 4315
 Fax: (02) 9565 4317 Email: info@nswstoma.com.au
 Web: www.nswstoma.com.au

Please allow a minimum of 5 business days from the day we receive the order to process and dispatch

Name: _____
 Residential address: _____
 City/Town: _____ Postcode: _____
 Membership No: _____ Phone No: _____
 Postal address (if different to above): _____
 City/Town: _____ Postcode: _____

ORDER FOR THE MONTH OF

**WE MUST RECEIVE YOUR ORDER
 BEFORE THE 25th OF THE MONTH
 OR YOUR MONTHS ALLOCATION
 MAY BE FORFEITED.**

Appliance item or description	Code No. on box	Qty ordered	Brand	Office use only	
				Total supplied	Date we received order
					Medical Certificate received for extra supply
					Month / Holiday checked
					Scheme checked
					Coded by
					Stock picked by
					Stock checked by
					Approved for release by

Please accept my payment of \$ _____ by: _____ (Please select applicable)

Card type: Only Mastercard or Visa accepted (minimum \$39.00 on Credit Card)

Cardholder's name (as appearing on card): _____

Card number:

Expiry: ____ / ____ (mm/yy)

Cardholder's signature: _____

NSW Stoma Limited recommends that members obtain the advice of an STN or medical practitioner before obtaining or using products, which have not previously been used by the member. Information provided by NSW Stoma Limited about the availability and/or features of any product is not intended to be an advice or recommendation as to the suitability of that product for use.