



## CREDIT CARD PAYMENT

Name: .....			
Address: .....			
.....			
Email (for receipt): .....			
Contact Phone No: .....			
Description of Payment - <b>Safety and Quality DVD - \$50.00</b> <b>Plus International Registered Postage – \$15.00</b>			
Cost/Price:	GST Included: Y/N	Total Amount:	
<b>\$65.00</b>	Y	<b>\$65.00</b>	
<b>Credit Card details:</b>			
(Circle one): Visa / Mastercard			
Card Number: .....			
Name on Card: .....		Card Expiry Date: .....	
CCV no: .....		Amount: \$65.00	
Signature: .....			

### OFFICE USE:

Job No.:

GL Code:

Invoice No.:

Date Processed:

Australian and New Zealand Intensive Care Society  
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