

c l a s s i c



c h o i c e

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**TO ORDER YOUR
SELECTION, PLEASE
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<p>Name & Address <i>(please print in capitals)</i></p> <p>Tel & Fax No. <i>(please provide this - we may need to contact you)</i></p>	<p>Special Instructions / Comments / Notes:</p>
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Please indicate method of payment. Do not send any money until you are issued with an invoice clearly indicating the LP's which are available and the total amount due. Please refer to PURCHASING INFORMATION sheet for payment details.

If you are paying by Credit Card, please complete ALL the details below:

Cardholder's Name	
Cardholder's Signature	
Cardholder's Address <i>(if not above)</i>	
VISA / MasterCard / Access	<i>(delete where applicable)</i>
Card Number	
Expiry Date	

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- Postal Order*
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Page No.	Item No.	Record Code	Brief Description	Price

