ORDER FORM	A. ANDREWS & CO. (MAIL ORDER) LTD.
	CUSTOMER INFORMATION

Name : _____

Office Phone : _____ Mobile Phone : _____

Address : _____

Email : _____ Date : _____

Item No.	Description	Qty.	Unit	Unit Price	Amount US$
				Total Amount US$	

Shipping Option (Please Tick)

☐ Air Parcel Post ☐ Surface Parcel Post ☐ Airfreight ☐ Seafreight ☐ Courier ☐ The Cheapest Way !

Payment Option

1 **Cheque / Bank Deaft** No. _____ dd. _____ Amount _____
delete if not applicable

2 **Telegraphic Transfer** No. _____ dd. _____ Amount _____
delete if not applicable

3 **Visa / Master Card** No. _____ Amount _____
delete if not applicable

Expiry date _____ / _____ Name on card _____
month *year* *Additional proof of identification may be required on request*

4 **Payment by Paypal :** sales@aandrews.com
delete if not applicable

I agree to adjust to difference, if any, on the reciept of invoice. Signature : _____

Bankers Information : Hong Kong & Shanghai Banking Corp., Ltd.

A/C No. : 116-590373-838