

Cash Sale Payment Form

Customer Information

Please complete the following section to ensure that the correct details appear on your Tax Invoice issued by Bambra Press Pty Ltd.

Name of Company: <small>(If Applicable)</small>			
Last Name:			
First Name:			
Address Line 1:			
Address Line 2:			
Contact No:			
City:		State:	
		P/Code:	
Quote/Job No:		Amount inc GST:	\$

If you wish to pay for your printing job via direct deposit into Bambra's account all direct deposits are received by Bambra on the next business day. Please send your remittance to accounts@bambrapress.com.au

Direct Deposit Details

NAB BSB No: 083 510
Account No: 51 529 6306
Bank Account Name: Bambra Press Pty Ltd
ABN: 22 005 637 016

If you wish to pay for your printing job via credit card please complete the credit card payment form below and forward it with your printing request.

Credit Card Payment Information

Card Type: MASTERCARD VISA

Card No.:

Security Code: Expiry Date: / Amount: \$ _____
(Last 3 digits on reverse of card)

Cardholder's Name: _____

Account Name: _____

For: (Invoice #'s if Applicable) _____

Note all payments must be received in full before any items are released for despatch.