

Order Form

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|----------------|------------------|
| Order Number: | Date (dd/mm/yy): |
| Contact Name: | VAT Number: |
| Contact Email: | Contact Phone: |

This order will be paid by: Invoice Credit Card

Shipping Address

Name:
 Address:

 Postcode:
 City:
 Country:

Invoicing/Credit Card Details

same as shipping

Name:
 Address:

 Postcode:
 City:
 Country:

Credit Card Number:

Expiry Date: Security Code: VISA MasterCard

| Qty | Cat # | Description | Unit Price | Total |
|---------------------------------|-------|-------------|---------------|-------|
| | | | | |
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| | | | | |
| | | | | |
| | | | | |
| Currency: EUR CHF | | | Total: | |

Total does not include any applicable shipping charges or taxes.
 Please complete form fully. Phone and VAT numbers are required for shipping.
 For full terms and conditions, please see www.cellntec.com
 Please send this encrypted form by email, or print and send it to us by Fax.

Comments: e.g. specific shipping date, receiving hours, quote number etc

| | |
|---------------|------------------------|
| SUBMIT | (email encrypted form) |
|---------------|------------------------|

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|--------------|--------------------------------|
| PRINT | (then fax to: +41 31 331 9583) |
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