



Technipro-PulmoMed Pty LTD
ABN: 54 002 730 421

Customer Order Form

Prices valid until 30 April 2020

Last updated: 1 March 2020

Please send this form to Technipro-Pulmomed by:

Mail: PO Box 38, Oatlands, NSW, 2117

Fax: 02 9897 5799

Phone: 02 9897 5899



Free Call: 1800 26 22 13

Email: info@pulmomed.com.au

PERSONAL ORDERS OVER \$300 RECEIVE FREE SHIPPING!*

CUSTOMER INFORMATION

NAME: _____
 TELEPHONE NUMBER: _____ EMAIL: _____
 CUSTOMER ADDRESS: _____ CITY: _____
 STATE: _____ POSTCODE: _____

CODE	PRODUCT DESCRIPTION	QTY	Price	+ Ship	TOTAL	\$/Unit
Hypertonic Saline						
P77G5000 	Pari MucoClear® 3% Hypertonic saline solution for mucus clearance 60 ampoules each containing 4mL NaCl (3%) <i>Due to the COVID-19 pandemic and to ensure stock continues to be available there is currently a limit of one pack per person per month.</i> (Circle the Correct Quantity)	1	72.00	14.30	86.30	86.30
		2	72.00	14.30	158.30	79.15
		3	72.00	14.30	230.30	76.75
		4	72.00	14.30	302.30	75.57
		5	72.00	Free	360.00	72.00
	Pari MucoClear® 6% Hypertonic saline solution for mucus clearance 60 ampoules each containing 4mL NaCl (6%) <i>Due to the COVID-19 pandemic and to ensure stock continues to be available there is currently a limit of one pack per person per month.</i> (Circle the Correct Quantity)	1	72.00	14.30	86.30	86.30
		2	72.00	14.30	158.30	79.15
		3	72.00	14.30	230.30	76.75
		4	72.00	14.30	302.30	75.57
		5	72.00	* Free	360.00	72.00
SHIPPING			\$14.30 (incl \$1.30 GST)			
* Free shipping applies to personal customer orders only over \$300.00.						

CREDIT CARD PAYMENT INFORMATION

NAME (ON CARD): _____ TELEPHONE NUMBER: _____
 CREDIT CARD: VISA MASTERCARD AMERICAN EXPRESS DINERS CLUB
 CREDIT CARD NUMBER: _____ EXPIRY DATE: _____
 TOTAL CHARGE \$: _____ AUTHORISED CARDHOLDERS SIGNATURE: _____