



# Facsimile Stationery Order Form

**Fax to:**

**MPL Pick & Pack**

**Fax No. (02) 6202 5788**

**Date:**        /        /

Item	Form No	Unit	Qty Required
Gap Cover Envelopes C4 (229 x 324)	MPLG 112 10/03	250 per carton	x carton
Gap Cover Envelopes C5 (177 x 250)	MPLO 113 05/04	250 per carton	x carton
Gap Cover Brochure	MPLO 697 09/06	Each	x Brochures
Facsimile Stationery Order Form	MPLO 380 08/08	50 per pad	x pads
Provider Details for EFT Payment	MPLO 1006 04/08	50 per pad	x pads
Authority for Customer Service Listing	MPLO 1005 10/06	50 per pad	x pads

**Delivery Instructions:**

Provider Name:

Provider Address:

Postcode:

Contact Name:

Contact Number:

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Special Instructions: