

## Furniture Order Form



					or decement	
Exhibtion Name:		Show Dates:				
Venue:		Hall/Stand No:				
		Stand Nam				
Company Name:		Invoice Ad				
Contact Name:		<u> </u>				
		1				
		Post Code:				
Telephone No:		Fax:				
Email:		Signature:				
Please en	nail form to info@	_	t.co.uk			
Con	tact us: Office - 0	2476 45747	4			
Description	Qty	Code	Colour	Unit Price	Total	
		Sub - total GBP £				
		VAT				
Payment Details			Grand To	otal GBP £		
Credit/Debit Cards		Expiry date	e:/_			
Matercard/Visa/Switch ONLY		Switch Iss:		Security No:		
Card Number :		_ Card Holders Name:				
Card holders Address		– Signature .				
		J				
By Bank Transfer to: HSBC, Market Place, Hinckley, LE10 1NU	ame: 3rd Element Limited					
Sort Code: <b>40 - 24 - 19</b>	Account N	Account Number: 31772570				
By Cheque: Please make cheques payable to: '3rd Element Send to: 3rd Element Ltd, Unit 23-25 Bilton Ind VAT No: 142 1165 54				UK Bank)		
Please note:						
VAT at the current rate will be applied to all cha	irges					
The order form is a request to supply and is subject to availability						
We will confirm your order shortly and advise a suitable alternative		ut of stock				

Registered Office: 3rd Element Limited, 34 Kent Drive, Hinckley, LE10 1UN