



just a minute[®]

business solutions that last

corporate-gift.com.au

Product customisation request

Please complete the attached form in two parts:

- Payment authorisation
- Product customisation requirements (if required)

Depending upon product availability, and the number of units, the customisation of products generally requires a minimum 14 days lead time.
Please advise if you have any special requirements.

Just a Minute[®] Business Solutions
6 Clarinda Court,
Vermont South, Victoria 3133, Australia

Phone: +61 3 9802-5288
Fax: +61 3 9803-8296

Email: gifts@corporate-gift.com.au
Web: www.corporate-gift.com.au

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Payment Authorisation

Client Name:				
Company name:				
Address:				
Country:			Zip/Postcode	
Phone:		Email		
Fax:		Mobile:		
SKU No	Product Name	Unit Cost	Qty	Total
Freight				
Total (Including GST)				
Card	Visa	MasterCard	Amex	Diners
Name on card:				
Card Number:				
_____ / _____ / _____ / _____			Expiry: _____ / _____	
Signature of Card Holder				
			_____ / _____ / _____	

Post, email or fax to:

Just a Minute® Business Solutions

6 Clarinda Court,

Vermont South, Victoria 3133, Australia

Phone: +61 3 9802-5288

Fax: +61 3 9803-8296

Mobile: 0418-322-635

Email: gifts@corporate-gift.com.au

Web: www.corporate-gift.com.au

Currency A\$

Electronic Funds Transfer to:
Westpac, Vermont South, 3133

Account: Just a Minute

BSB: 033-127

Account Number: 51-1394

www.corporate-gift.com.au





Order confirmation details

Delivery Address:

Client Name:	
Company name:	
Address:	
Zip/Postcode	
Phone:	Email
Fax:	Mobile:

Customisation requirements

SKU No:

Product:

Message or image (the original EPS image is required for any artwork):

Note: Copies of the original EPS are not acceptable and will delay the artwork processing.

Logo PMS Colour(s): #1

#2

#3

#4

Additional Instructions

Font:

Point Size:

Font PMS Colour:

Font:

Regular

Italic

Bold

Bold Italic

Case:

Sentence case

lower case

UPPER CASE

Title Case

Delivery date required:

____/____/____

(minimum 14 days with customisation)

Client signature:

Date: ____/____/____