



C-TECH Ltd

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NEW ZEALAND

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CREDIT CARD AUTHORISATION

CARBON-TUBE



Please debit the following credit card:

MasterCard

Visa Card

Card Number: _____

Card Name: _____

Signature: _____

Expiry Date: _____

BILLING DETAILS

Company: _____

Billing Address: _____

Contact Name: _____

E-mail (for invoice): _____

SHIPPING DETAILS

Shipping Address: _____

Contact Name: _____

Contact Phone No.: _____

This authorisation form should be faxed to C-Tech Ltd on +64-9-810-8409