cid:2CA55AC1-78EC-4F67-B4D9-B03F741FDADB@home.gatewayBUDERIM FOUNDATION FINE WINE OFFER 2016

**2012 EDEN VALLEY SHIRAZ & 2014 ADELAIDE HILLS CHARDONNAY**

ORDER FORM – Minimum order : six bottle packs at $30.00 per bottle. Total Cost $180.00 per pack. Includes FREE delivery after your payment has been received. Please write information clearly.

Name -------------------------------------------------------------------------------------------------------------------------------------

Phone------------------------------------------------------email------------------------------------------------------------------------Delivery Address: ----------------------------------------------------------------------------------------------------------------- -----------------------------------------------------------------------------------------------------------------

Qty of 6 bottles of Chardonnay

Enquiries: Erik Larsen ph. 0419 772 928

Email [erik2@cirlock.com.au](mailto:erik2@cirlock.com.au)

PO Box 39 Buderim 4556

Qty of 6 bottles of Shiraz

Qty of mixed packs:

3 Chardonnay + 3 Shiraz

**Signature:......................................................................** Total Cost

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cid:2CA55AC1-78EC-4F67-B4D9-B03F741FDADB@home.gatewayP O Box 1408 BUDERIM Qld. 4556 ABN: 96107478777

Email: [info@buderimfoundation.org.au](mailto:info@buderimfoundation.org.au)

Payment Slip for Buderim Foundation Fine Wine Offer 2016/2017- Foundation Chardonnay or Shiraz

Please use the preferred payment method, and forward this slip by post or email to coordinator: Erik Larsen

P O Box 39 Buderim 4556 [erik2@cirlock.com.au](mailto:erik2@cirlock.com.au) – phone 0419 772 928 – Delivery will then be organised

**Direct Debit:**

Please use MGG and YOUR NAME as reference details on the transfer to:

Bank of Queensland       BSB 124 081        Account 20092405            Amount Paid $\_\_\_\_\_\_\_\_\_ Date -\_\_\_/\_\_\_\_/2016

**Payment by Credit Card: - Master Card or Visa Card ONLY**

Please Debit my               VISA                      MASTER CARD                                                   Total Amount $

Credit Card Number

Card Expiry Date                                   /

Card Holders Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Card Holders Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Payment by Cheque:**

**Please attach your cheque payable to Buderim Foundation Ltd.**

**Cheque Attached            $                                           Mail to                    Buderim Foundation Ltd**

**P O Box 1408**

**Buderim Qld 4556**