



OPTIQUE ET VISION
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 Siret n° 33292052900010
 N° intra fr32332920529
 Ape 334P
 Rcs antibes 332 920 529 - 85 B 340

Customer shipping adress:

Date of order:
Last name :
First name:
Number :
Street :
City :
State if applicable :
ZIP Code :
Country :
Phone / Fax :
E mail :

Fill this form and send it by fax, mail or email.
 For bank transfert, please contact us to obtain our bank account information.

Online purchase order form for Losmandy NS kit for Euro area

Quantity	Reference	Unit price euros	Total euros
	Kit G11NS-VIS for G11	440	
	Kit GM8NS for GM8	440	
	Complete G11 NS kit <u>with</u> spacer	798	
	G11 Spacer only	358	
	Shipping International Express. For more than 2 items please contact us.	18	
	TOTAL	...	

Payment :

- . Bank transfert, please contact us to receive our bank account information.
 - . Credit card.
 - Card : Visa Mastercard
 - Name of the owner of the card :
 - Please write the 16 numbers : _ _ _ _ / _ _ _ _ / _ _ _ _ / _ _ _ _ .
 - Date : _ _ / _ _ .
 - 3 digits on the back : _ _ _ .
 - Signature of the card owner :
- We will charge you the day your order ships.