



**Name of Product** : \_\_\_\_\_  
**Price** : \_\_\_\_\_  
**Transport Charges:** RM 10  
**Total** : \_\_\_\_\_

**Date of Delivery:** \_\_\_\_\_

**Recipient Info**

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Postcode: \_\_\_\_\_  
 City/State: \_\_\_\_\_  
 H/P: \_\_\_\_\_  
 Tel: \_\_\_\_\_  
 Email: \_\_\_\_\_  
 Message to Receiver: \_\_\_\_\_

**Sender Info**

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Postcode: \_\_\_\_\_  
 City/State: \_\_\_\_\_  
 H/P: \_\_\_\_\_  
 Tel: \_\_\_\_\_  
 Email: \_\_\_\_\_  
 Special Instructions: \_\_\_\_\_

**Payment Info**

**Bank In**

**or**

**Credit Card Payment**

<u>Bank In</u>	Payable to: <b>CARI Internet Sdn Bhd</b> CIMB: <i>Account Number:</i> 1421-0006963-055 RHB Bank: <i>Account Number:</i> 2-12200-00045480 Hong Leong Bank Bhd: <i>Account Number:</i> 061-00-07378-0 Maybank Bhd: <i>Account Number:</i> 5124-9111-4145 Public Bank: <i>Account Number:</i> 3983-162-100 <b>Please fax the bank in slip together with this form</b>
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Credit Card Payment:

Name (as it appears on card) : \_\_\_\_\_  
 Card Type (check one) : Visa / Master Card  
 Card No. # : \_\_\_\_\_  
 The last 3 Digit of the Card (at the back of the card): \_\_\_\_\_ Expiry Date \_\_\_\_ / \_\_\_\_

I warrant that all persons whose signatures are requested to sign on this account have signed and received a copy of this agreement.

I, the undersigned, Mr. / Mrs. / Ms./ Dr. \_\_\_\_\_ hereby authorizes  
 CARI Internet Sdn Bhd to debit my credit card with the Amount of: RM \_\_\_\_\_  
 for the order of flowers, flower model: \_\_\_\_\_

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

**Please fax this order form to 03- 7880 9717 once you complete the required details.**