

SELF-ADMINISTERED ONLINE ERGONOMICS PACKAGE

PURCHASE ORDER

Thank you for your query regarding our self-administered online ergonomics package.

In order to facilitate this process, could you please complete this purchase order and the attached excel spreadsheet with your employee's names and email addresses and return via email. We will use this information to send out links to the online ergonomics service.

Quantity of Services Required	Qty	Amount
Self-administered online ergonomics package		
Total incl GST		

Acceptance of Costs			
<p>To accept this quote please sign below and return via email to wfhergo@workrehab.com.au, and we will then send through the online service</p>			
Name		Date	
Acceptance	<input type="checkbox"/> I understand that completing and returning this form is a binding agreement and constitutes a purchase order.		
Billing Information		Your Purchase Order No: If required	
Company Name			
Accounts Contact Name		Phone	
Email		ABN	
GST Registered	<input type="checkbox"/> Registered for GST <input type="checkbox"/> Not registered for GST		
Address			

Please do not hesitate to contact us on 1300 856 440 should you have any queries.