

I Pod Loading – Service D

v.200705

Order Form - send this completed sheet with your credit card details to:

Cleaford Services Ltd
46 Hazell Road
FARNHAM GU9 7BP

Customer Name:

Credit Card details*

Delivery Address:

Card No: ____ ____ ____ ____

Start: ____/____

Expiry: ____/____

Issue No: _____

Post Code:

Customer Phone:

Customer email:

Customer signature: _____

Date: _____

iPod type (Mac/Windows) _____

Number of CDs _____

*We will not charge your credit card until the work is completed.

In the event that our USB drive is not returned to us we will make a further charge of £150 + VAT as compensation for loss of our drive.