

# ROSTHWAITE FARM

## P A Bice

*For Payment to P A Bice*

***Invoice in the name of:***

Name			
Contact Numbers	Work:		Mobile/Home:

***Details of Credit Card***

Type:	<input type="checkbox"/> Visa	<input type="checkbox"/> Mastercard	<input type="checkbox"/> Other: <i>Sorry Not: American Express or Diners</i>
Card Number:			
Expiry Date:		CVV	Last 3 numbers on rear
Name as it appears on card:			
Amount to be paid: ONCE ONLY	\$		
Signature of Card Holder			
Email – for receipt			

*Please fax this form to 02 4405 5898*

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**Rosthwaite Farm**  
**Phone: 02 4868 3966**

Yarrowa Road

Moss Vale NSW 2577  
*Fax: 02 4405 5898*