



For internal use only	
Record No.	_____
Paid by	<input type="checkbox"/> Cheque <input type="checkbox"/> Order Form
Handled by:	_____

Book Order Form

To: PolyU Press (Fax: 2364 0246 Enquiries: 2766 5102) Email: polyu.press@polyu.edu.hk

Name of Faculty / Dept. / Centre: _____

Contact Name: _____ Telephone No.: _____

Item	Unit Price	Qty	Sub-total Amount (HK\$)	Item Received By (Name and Staff No.)	Date of Collection
1.					
2.					
3.					
4.					
5.					
6.					
7.					
Total (HK\$):					

Payment Method

Account to be Debited: _____
Department Account Number

Authorized Signature: _____ Position: _____
(HoU/Purchasing Delegate)

Name in Block Letters: _____ Date: _____