

GPOS

Leading E-commerce solutions

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Section A: Cancel Support Form

Company Informa	ation_			
Company Name				
Trading Name				
Address				
Contract No	Phone No:			
Contact Name		Mobil No:		
F '1				
		Support Ite		
GPOS Services	Stop Date	Reason	Branch	
iven in this form is t	rue and correct (Section A and B)	are that the informate - Our Accounts for Ser	
Contract Balance.				
		ny support cost b	oy GPOS \$120+GST	<u>hour</u>
ate after cancel supp	ort			
Director Name: Sig		ture:	Date:	
GPOS Office Use:				
Contract No:			e:	
Cancel Date:		GPOS Inv N	O:	
Sacn: Upload : [