

US & International Order Form

Program Name	Program Code	Quantity	Price* US\$	Total

* See <http://www.acurasoft.com/products/products.html> for program codes and current prices

Subtotal US\$ _____

Shipping & Handling (No charge for online download) US \$ _____

TOTAL US \$ _____

PAYMENT METHOD:

Note: All orders must be pre-paid.

Check or money order payable to Acurasoft.

Company purchase order # _____

(Must include authorized copy.)

VISA MASTERCARD

Credit Card Number: _____

Card Holder Name: _____

Expiry Date Month /Year: _____

Signature (Required): _____

Card ID _____



HOW TO PLACE YOUR ORDER

By Mail: **Acurasoft,**
100 Bay Street South, Unit# 202
Hamilton, Ontario L8P 3H3
CANADA

By Fax: **1 775-269-6450**

By E-Mail: **orders@acurasoft.com**

Internet: **www.acurasoft.com/**

Bold = Required ; *Italic* = Optional

SHIP TO:		BILL TO: <i>(if different)</i>	
First Name:		First Name:	
Last Name:		Last Name:	
Email Address:		Email Address:	
<i>Phone Number:</i>		<i>Phone Number:</i>	
<i>Fax Number:</i>		<i>Fax Number:</i>	
<i>Company:</i>		<i>Company:</i>	
Address:		Address:	
City:		City:	
State/Province:		State/Province:	
Zip/Postal Code:		Zip/Postal Code:	
Country		Country	

Work Area: (Optional) -----