

estore order form

Customer#

Please fill out and mail form to **advancis.com, 2911 Turtle Creek Blvd #300 Dallas TX 75219****Personal Information**

Last name _____ First name _____

Title _____ Company _____

Address _____

City _____ State _____

Zip code _____ Country _____

Email _____ Web site _____

Telephone _____ Fax _____

Identification *(Please choose your PIN and password carefully; this information will give you access to restricted sections of the web site. Limit your entries to 8 characters; use only A-Z, a-z, 0-9)*

PIN _____ Password _____

Software selection *(Prices noted below are for a single-user license. Volume discounts and site licensing opportunities are available.)***Online Advantage** 12 months :: USD 1295 _____ number of user(s)**Payment Information** *(Please check one payment option. If your order totals USD 10,000 or more, you must pay via wire transfer only)* **Option 1. Credit card** Visa Mastercard Eurocard

Card Number _____

Expiration date (month/day/year) _____

Cardholder's name _____

3-digit card verification number* _____

Signature _____

Issuing Bank _____

* Visit http://advancis.com/estore/EU/cc_verification.html for details on locating this number. **Option 2. Wire transfer** *(Wire transfer information will be provided in your confirmation email)*