

Collector

Order form

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Please fax this order form to the following number

+49 (0)228-20 16 02 9

1 Please compute your order

Product	Unit Price	Quantity	Total Price
Collector Software	850,00 EUR	_____	_____
Additional PDA License	380,00 EUR	_____	_____

2 Method of Payment

Credit Card → **3**

Purchase order (please attach purchase form) → **4**

Sub-Total	_____
S&H	13,00 EUR
Total	_____

3 Credit Card Data

Charge to: Mastercard VISA Expiration date: _____

Account Number: _____

Cardholder Name (Please Print) _____

Cardholder Address: _____

City/State/ZIP: _____ Signature: _____

4 Shipping address

Name: _____

Address: _____

City/State/ZIP: _____

5 Billing address (if different from shipping address)

Name: _____

Address: _____

City/State/ZIP: _____

6 Date and Signature: _____

Thank you for your order!