## **Config** Informationstechnik eG



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## **TimeTrax Order Form**

I want to register my d	emo copy of TimeTrax (Please provide your full address):
Name:	
Street:	
City:	
State:	ZIP Code:
Country:	
—— I pay DEM 79.95 (DEM	1 68.92 for customers from outside the European Union).
I add DEM 5.00 if I cho	oose fax or mail delivery of my registration key.
I add DEM 10.00 if I pay by Euro Cheque.	
☐ I pay by credit card: ☐ VISA ☐ MasterCard/EuroCard	
Card Number:	
Expiration Date:	Name on Card (if different from above):
I pay by enclosed Euro Cheque (only with order by mail)	
My TimeTrax Serial Number:	
I would like to get my registration key by: E-mail, Fax, Mail.	
E-mail Address:	
Fax Number:	
Delivery Address: (if different from above)	
Additional Remarks:	
Date, Signature:	