

## BILL & SHIP TO

^ OWNER OF LICENSES (ORGANIZATION OR PERSON)
^ CONTACT PERSON
^ EMAIL FOR DELIVERY OF LICENSE KEYS
^ OWNER'S POSTAL ADDRESS
^ CITY, STATE
^ ZIP/POSTAL CODE
^ COUNTRY
^ TELEPHONE
^ FAX
^ VAT NUMBER (EUROPEAN UNION ONLY)

## EMV RETAIL ORDER FORM

FAX TO +30.2310.811.603

### HOW MANY COPIES IN TOTAL (BOTH PLATFORMS)?

ESCAPE MEDICAL VIEWER	PRICE €	QTY	LINE TOTAL
1 unit	295.-		
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6-10 units	250.-		

**NET TOTAL (excl. VAT)**

**VAT 23% (EU RESIDENTS ONLY)**

**TOTAL (incl. VAT)**


### HOW MANY COPIES PER PLATFORM?

..... copies for MacOS

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### IMPORTANT NOTICE

EMV USES TECHNOLOGICAL MEASURES FOR COPY PROTECTION.  
 YOU WILL NOT BE ABLE TO USE THE PRODUCT UNLESS YOU FULLY COMPLY WITH THE PRODUCT ACTIVATION PROCEDURES.

### INSTRUCTIONS

- SEND PDF INVOICE
- SEND PAPER INVOICE BY POST
- I WANT TO PAY BY BANK TRANSFER (CONTACT FOR BANK INFORMATION)

### CREDIT CARD PAYMENT

**AMOUNT (EURO)** : \_\_\_\_\_

**CARD TYPE** :  VISA  MASTERCARD

**CARD NUMBER** : \_\_\_\_\_

**HOLDER NAME** : \_\_\_\_\_

**BILLING ADDRESS** : \_\_\_\_\_

: \_\_\_\_\_

**EXPIRATION** : \_\_\_\_\_

**CVV/CVC** : \_\_\_\_\_ (3-DIGIT SECURITY CODE)

**SIGNATURE** : \_\_\_\_\_

**DATE (DD-MM-YYYY)** : \_\_\_\_\_

• Write clearly or print. **No continuous writing please!**

• **VAT:** Value-Added Tax is applicable only to residents of the European Union. To be exempted from this tax, please provide your VAT number (will be verified against the VIES database).

• **BLOCKED CARD:** If you haven't used your card for mail orders lately, your Bank may have blocked it to prevent fraudulent use. To avoid unnecessary delay make sure your bank accepts remote charges.

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