

RETAIL ORDER FORM

FILL OUT AND FAX TO +30.2310.811.603

| | | QPix 3.5 | | | QGrid 1.5 | | | QMedia 1.5 | | | QMLight 1.5 | | | QDrop 1.5 | | | LINE TOTAL € |
|----------------------|-----------|-------------|-----|-----|-------------|-----|-----|-------------|-----|-----|-------------|-----|-----|------------|-----|-----|--------------|
| | | € | MAC | WIN | € | MAC | WIN | € | MAC | WIN | € | MAC | WIN | € | MAC | WIN | |
| DEVELOPER | | 215 | | | 195 | | | 255 | | | 195 | | | 105 | | | |
| | 1 UNIT | 120 | | | 120 | | | 135 | | | 95 | | | | | | |
| RUNTIME * | 5 UNITS | 430 | | | 430 | | | 495 | | | 380 | | | 105 | | | |
| | 10 UNITS | 660 | | | 660 | | | 825 | | | 595 | | | 160 | | | |
| ENGINE ** | UNLIMITED | 1750 | | | 1750 | | | 1925 | | | 1495 | | | 450 | | | |
| | 1 SEAT | 120 | | | 120 | | | 135 | | | 95 | | | | | | |
| | 5 SEATS | 430 | | | 430 | | | 495 | | | 380 | | | 105 | | | |
| SERVER | 10 SEATS | 660 | | | 660 | | | 825 | | | 595 | | | 160 | | | |
| EXPANSION *** | 20 SEATS | 990 | | | 990 | | | 1072 | | | 895 | | | 260 | | | |
| | 30 SEATS | 1275 | | | 1275 | | | 1450 | | | 1130 | | | 335 | | | |
| | 50 SEATS | 1750 | | | 1750 | | | 1925 | | | 1495 | | | 450 | | | |

IMPORTANT NOTES

- * A DEVELOPER LICENSE FOR THE PLATFORM IS REQUIRED.
- ** MY **DEVELOPER** LICENSE PRODUCT IS:
- *** A DEVELOPER LICENSE FOR THE **SERVER** PLATFORM IS REQUIRED.

NET TOTAL

EU ONLY: ADD VAT 23%
OR PROVIDE VAT NUMBER

GRAND TOTAL

OWNER DETAILS

^ **OWNER OF LICENSES (ORGANIZATION OR PERSON)**

^ **CONTACT PERSON (IF OWNER IS ORGANIZATION)**

^ **DELIVER LICENSE KEYS TO EMAIL**

- Please print (no continuous writing)
- **VAT:** This tax is applicable only to residents of the European Union. To be exempted, please provide your VAT number (will be verified with VIES).
- **CARD VERIFICATION:** Credit card charges above 300 euro may be subject to extended verification. Be prepared to call your bank and confirm the charge, if required. Some delay may occur due to timezone differences.
- **ALL SALES FINAL:** Please evaluate the products, read the licensing terms, and contact us with any questions **before** buying. **NO REFUND, CANCELLATION OR MONEY-BACK GUARANTEE.**

BILLING DETAILS

^ **BILL TO (ORGANIZATION OR PERSON)**

^ **CONTACT PERSON (IF BILLING AN ORGANIZATION)**

^ **CONTACT EMAIL**

^ **STREET ADDRESS**

^ **CITY, STATE**

^ **ZIP/POSTAL CODE**

^ **COUNTRY**

^ **TELEPHONE**

^ **FAX**

^ **VAT NUMBER (EUROPEAN UNION ONLY)**

INSTRUCTIONS

- SEND ELECTRONIC (PDF) INVOICE
- SEND HARDCOPY (PAPER) INVOICE BY POST
- PAYMENT 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) : _____