



# ORDER FORM

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## SATELLITE VALUE CHAIN: THE SNAPSHOT 2018 Edition

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Product		Price	Total
Digital File	<b>X</b>	€ 4,000	
Additional license(s) for digital files	Qty:	€ 400	
Enterprise license	<b>X</b>	€ 10,000	
VAT if applicable companies based in France must add VAT 20%			
<b>Product Total in Euros (€)</b>			

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Accounting Dept. E-mail: \_\_\_\_\_

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### Invoicing Address (Please use capital letters)

First name \_\_\_\_\_  
 Last name \_\_\_\_\_  
 Company name \_\_\_\_\_  
 Occupation \_\_\_\_\_  
 Address \_\_\_\_\_  
 Zip Code \_\_\_\_\_ City \_\_\_\_\_  
 State \_\_\_\_\_ Country \_\_\_\_\_  
 Phone \_\_\_\_\_ Fax \_\_\_\_\_  
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### Payment Information

Company VAT n° (required for all companies)  
\_\_\_\_\_

#### Credit Card

Please check credit limit with bank prior to submitting form.

VISA     Mastercard     AMEX

Cardholder Name (as it appears on card)  
\_\_\_\_\_

Cardholder Number  
\_\_\_\_\_

Expiration Date (month/year) | Cryptogram (last 3 digits on the back)  
\_\_\_\_\_

Cardholder's Signature  
\_\_\_\_\_

#### Bank Transfer

(All bank charges are to be paid by the sender)

to EUROCONSULT, please NOTE IMPERATIVELY:

Swift-BIC code: CM CI FR PP

IBAN: FR76 3006 6109 1500 0200 6760 132

Account n° 00020067601

CIC Nanterre Enterprises, 105 Rue des 3 Fontanot, 92022 Nanterre Cedex, France.

#### Cheque or Money Order Enclosed

Payable to Euroconsult:

86 Blvd. Sebastopol, 75003 Paris, France

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### Delivery Address (If different from invoicing address)

First name \_\_\_\_\_  
 Last name \_\_\_\_\_  
 Company name \_\_\_\_\_  
 Occupation \_\_\_\_\_  
 Address \_\_\_\_\_  
 Zip Code \_\_\_\_\_ City \_\_\_\_\_  
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