



# ORDER FORM

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## PROSPECTS FOR REMOTELY PILOTED AIRCRAFT SYSTEMS 2016 Edition

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Product		Price	Total
eFiles (Including a PDF of the report)		€ 4,000	
Additional eFiles license	Qty:	€ 400	
Enterprise license		€ 10,000	
VAT if applicable companies based in France must add VAT 20%			
<b>Product Total in Euros (€)</b>			

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

### 4 Invoicing Address (Please use capital letters)

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Last name \_\_\_\_\_

Company name \_\_\_\_\_

Occupation \_\_\_\_\_

Address \_\_\_\_\_

Zip Code \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Country \_\_\_\_\_

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2

### Payment Information

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

#### Credit Card

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

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

First name \_\_\_\_\_

Last name \_\_\_\_\_

Company name \_\_\_\_\_

Occupation \_\_\_\_\_

Address \_\_\_\_\_

Zip Code \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Country \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

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Occupation \_\_\_\_\_

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