Reseller Order Form

logicity

Reseller Information

Company Name: _____
Contact Name: _____
E-mail: _____
Telephone: _____

End User Information

Company Name: (as will appear on license)_____
Contact Name: _____
Address: _____
_____
City: _____
State: _____
ZIP: _____
Country: _____

Order Information

Qty: _____ Item: _____
Qty: _____ Item: _____
Qty: _____ Item: _____
Qty: _____ Item: _____
Qty: _____ Item: _____
Qty: _____ Item: _____
Qty: _____ Item: _____
Qty: _____ Item: _____
Qty: _____ Item: _____
Qty: _____ Item: _____

Payment Information

Purchase Order Number: _____
Credit Card Type: VISA MASTER CARD DISCOVER AMERICAN EXPRESS
Name: _____
CC Number: _____
Expiration Date: _____
Security Code: _____

Thank You!

For more information on Logicity, please visit www.logicitysuite.com or call 330.335.6442.

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