Instant File Access Order Form

Version 3.01

Fill out this order form and mail along with payment in **US dollars** to:

Alexoft 507 de la Metairie Nuns' Island, Quebec H3E 1S4 CANADA

Name:		
Company Name:		
Address:		
City:		State:
Zip Code:		Country:
Phone:	()	_
CompuServe ID:		_
Internet ID:		
No. of users:		(see pricing below)
	1 to 24 Users 25 to 49 Users 50 to 99 Users 100 and up	@ \$30.00/User @ \$26.00/User @ \$22.00/User @ \$15.00/User
Total:	\$	
	NOTE: Payment only ac and must be in US Dolla	cepted by cash or Cheque
Where did you ge	t your copy of IFA	?

Optional Information

Computer Name			
Computer Type			
I would like to suggest the following changes/enhancements product	to this		