

Purchase Request – GG2002 Conference Proceedings

Reference Number*:

Date Requested:

* To be filled by Publisher

Submitted By

Name:		Address Line :	
Title:		City:	
E-mail Address:		State/Province:	
		Postal Code:	
Telephone Nr:		Country/Region:	

Shipping Information

If you have specified your work address above and wish to receive the book at a different place please fill-in the information requested below

- Ship to Address Listed Below
- Ship to Address Listed Above

Deliver To

Name:		Address Line :	
Title:		City:	
E-mail Address:		State/Province:	
		Postal Code:	
Telephone Nr:		Country/Region:	

Itemized List

Currency: € (EUROS)

Quantity	Unit Price	Total
	40.00 €	€

BILLING INFORMATION

Please give your credit card details

Credit Card: VISA MASTERCARD

Credit Card Number: _____ - _____ - _____ - _____

Credit Card Swift Code (see the back of your card for a three-digit number) _____

Credit Card Expiration Date: ___ / ___ (mm/yy)

Signature

Sign and print your name.

Signature

Date

NAME

Fill-in and send the form by FAX to Ziti Editions (+30 23920 72229) with a copy to Prof. Ilias N. Tziavos (+30 2310 995948).