

Upgrade Order Form for DocuCom PDF Driver 9

Customer Information:

First/Middle Name:		Last Name:	
Company/Organization:			
Address:			
**Telephone:		**E-mail:	
Where did you purchase DocuCom PDF Driver From?			
Zeon Online	Scansoft	PDF Store	Others (please name):
Previous Purchased Version: V7.X		V8.X	Date of Purchase:
Current Product Serial Number:			

(Important Notes: A purchase confirmation with the Serial Number will be sent to you through e-mail. Please follow the description in the e-mail to activate the product.

Zeon DocuCom PDF products, providing a 30 days full function free Trial, MUST be activated online before expired. Otherwise, a trial watermark will be displayed on each page of PDF document. Please contact sales@pdfwizard.com for business related inquiry and support@pdfwizard.com for technical inquiry).

Upgrade to DocuCom PDF Driver 8.x	Volume of License (Unit Fee in USD\$)					Quantity	Sub Total (USD\$)
	1	2-9	10-49	50-99	100-250		
Version 8.x to 9.x	\$19.6	\$15.6	\$13.6	\$12.4	\$10.8		
Version 7.x to 9.x	\$29.4	\$23.4	\$20.4	\$18.6	\$16.2		
Maintenance Services:	1 year		2 years		3 years		
CD-ROM shipping handling cost (only if you need a CD-ROM): (7-12 days for the delivery)							
Asia \$15.00		Europe \$20.00		US / Canada \$20.00			
1. All prices are subject to change without notice. 2. Maintenance Services Fee: 1 year: 30% of purchased price; 2 years: 55% of purchased price; 3 years: 75% of purchased price. 3. We prefer to be credited by wire transfer if purchasing amount is exceeding US\$1,000.						Total (\$USD)	

Refund Policy: A 30 days full function free trial products have been provided for evaluation purposes. Please follow our Refund Policy if you want to return the products. Please de-activate the product after you request a refund.

Payment Options

Wire Transfer	TAIPEI FUBON Commercial Bank Co., Ltd. Min-Sheng BR. SWIFT CODE # TPBKTWTP 454		A/C # 454-120-00025-0 In favor of Zeon Corporation	
Credit Card	Master	VISA	JCB Card	American Express
	Bank of Issue:			Expired Date :
	Holder's Name :			
	Card Number :			
	validation code (3 or 4 digit)		※ Your Signature :	

Zeon Corporation

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Zeon Staff Only	Authorized No :
	R :