



StruCalc, Inc.
P.O. Box 2568
Corvallis, OR 97339
1-800-279-1353

Product/Services: Full, unlimited access to StruCalc 9.0 (software license)

Customer Info:

Customer ID: _____ (leave blank if you do not have one)

Company: _____

Contact: _____ (must be a legal signee of credit card)

Address: _____

Email: _____ (without valid email license can't be delivered)

Terms:

Agreement of the contact above to make monthly payments for purchase of StruCalc 9.0 to StruCalc, Inc. (hereafter the company). The terms of the payment plan are subject to approval of the company. The company reserves the right to terminate this agreement at any time if it has any reason to believe that the client is in breach of its obligations set forth by this agreement.

Order: (check those that apply for network orders please call our sales line)

New Users

- (a) ___ StruCalc 9.0 License (1 user 2 computers) \$595.00
- (b) ___ Add. License (# of extra licenses) @ \$195.00 ea

Upgrade Users (you own a license of a previous version of StruCalc)

- (c) ___ Upgrade from StruCalc 8.0 Main License \$195.00
- (d) ___ Add'l License Upgrade(# of extra licenses) @ \$95.00 ea
- (e) ___ Upgrade from pre- 8.0 Main License \$295.00
- (f) ___ Add'l License Upgrade from pre-8.0
(# of extra licenses) @ \$149.00 ea

- (g) \$_____Total (add and multiply all entries from above)
(h) Select your term_____ (up to 3 months for orders under \$200, up to 5 months for orders over\$200)

Specific Terms: The client agrees to pay \$____immediately and then monthly, divide your total from (g) by your term from (h) starting on the 1st of____, 20 .
(input the month after the current month and the current year)

Refunds: The client's first payment is fully refundable for up to 30 days after the payment was processed minus a 3% refund fee. Any and all payments after the first payment are non-refundable either due to discontinued use of the software license by the client or cancellation of the software license by the company for breach of payment.

Authorization:

I, the undersigned, am an authorized signee of the below credit card and declare that the information within this document matches the information as such and am legally authorized to make purchases using the card. I also agree that the credit card below will be charged on or about the 1st of each month the amount in the specific terms above until the full amount of (g) above is fulfilled and that if at any time the payment is not able to be made the software license being purchased within this document will be disabled and I will not be eligible for a refund of any money paid after the first 30 days of this agreement.

Signature: _____ Date: _____

Name: _____(print name on card)

Credit Card #: _____

Exp. Date: _____

Print and send in completed form to StruCalc, Inc. P.O. Box 2568 Corvallis, OR 97339, or email to sales@strucalc.com

Please note:

Without a valid email address you will not be able to receive your licensing information.