Print and Fax to: IRDES Service diffusion
117bis rue Manin
75019 PARIS

Tél. : 33 (0)1 53 93 43 17 or 06 or 02
Fax : 33 (0)1 53 93 43 07

ORDER FORM IRDES' REPORTS

CHOOSE A SUBSCRIPTION

Reference	Author(s) - Title(s)	Quantity	Unit price	Total net price
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....

Total to pay: .....

PAYMENT METHODS

Upon ordering

◯ Check payable to IRDES

◯ Credit Card ◯ Visa ◯ Mastercard ◯ Eurocard

N° .....

Expiration date: .... Cryptogram: .....

Signature :

In order to be processed, orders coming from abroad must imperatively be accompanied by a payment. An invoice will be sent when your order is recorded

CUSTOMER BILLING ADDRESS

Billing adress : Mrs ◯ Miss ◯ M. ◯

Name: ..... First name:.....

Position: ..... Department: .....

Company: .....

Address: .....

.....

Zip-code: ..... Town: ..... Country: .....

Phone: ..... Fax: .....

E-mail: ..... Web Site:.....

Contact us: publications@irdes.fr