

ORDER FORM

“A Complete List of Extended Pharmaceutical Patents in Japan”

----- ~~\$1,200.00~~

**** Before September 30, 2005, LIMITED TIME OFFER***

----- ~~\$1,000.00~~

**** No shipping fee !!! (The item will be shipped to you by express mail service.)***

I would like to order _____ of this booklet(s).
(Quantity)

Company Name: _____

Name: _____ Department: _____

Address: _____

City / State / Zip: _____

Country: _____

Telephone: _____ FAX: _____

E-mail Address: _____

----- Payment Information -----

As soon as we receive your order, we will send you an INVOICE through e-mail. Please confirm the total amount and wire transfer the amount to the following account:

The HIBIYA BRANCH of SUMITOMO MITSUI BANKING OF TOKYO
1-3-12 Nishi-Shimbashi, Minato-Ku, Tokyo 105-0003, JAPAN
Account Holder: PATOLIS Corporation
Account Number: 7909056
SWIFT Code: SMBCJPJT

Once the payment is confirmed, the booklet(s) will be shipped to you as soon as possible.

Please fill out all the items listed in this form, and send it to PATOLIS Corporation by FAX or E-mail.

FAX: +81- 3-5690-3504
E-mail: search@patolis.co.jp