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White - Aviotex

Green - Customer

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Telephone (Home)(Office)	Additional charges to be invoiced to		
Ship to: (if different from above) Mr, Ms			
Address State Zip	_ Driver's License No State		
Fee Schedule:	Long Distance Call Required  Yes  No		
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<ul> <li>□ \$ one time subscription fee plus 0.60¢ per minute cor</li> <li>□ Block time payment for reduced connect time fee</li> <li>□ \$ pre payment = 0.50¢ per minute</li> </ul>	nnect time.		
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Should you wish to use our flight planning system, please provide us a complete copy of the performance section of your	NAME (USER) 1.	1.D. 122318	Password 2369
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I have read and understand the above agreement, the Terms and Manual referred to in the Terms and Conditions (the receipt of cop of the provisions thereof.	Conditions on the reverse side lies of all of which I hereby ackr	of this agreemer nowledge) and I a	nt, and the Subscriber's agree to be bound by all
Subscriber Signature	en no processe de la persona de la como de l La como de la como de l La como de la como de	Date	eries og sent i enema erieski sentekt to des sent erieske erieske vom er sam
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Sales Representative Kathel Waller	20 13 13 13 13 15 15 16 17 13 13 15 15 15 15 15 15 15 15 15 15 15 15 15	The right back of	CHECKS THEODY ST
Approved by Aviotex		Date	

Canary - Accounting

Pink - Marketing

Gold - Shipping

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AUTH. NO. IDENTIFICATION

1087

THIS FORM TO BE USED WITH

VISA

TAKE \_ 0000412 SEND QUAN DESCRIPTION UNIT COST AMOUNT The issuer of the card identified on this item is authorized to pay the amount shown as TOTAL upon proper presentation I promise to pay such TOTAL (together with any other charges due thereon) subject to and in accordance with the Agreement governing the use of such card. SUB TOTAL TAX PURCHASER-SIGN HERE TIPS/MISC. TOTAL

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