PLEASE VALIDATE MY PURCHASE OF YOUR PROGRAM.

	(Please print prog	gram name)		
Purchased: (Date)	From: (Firm	n)		
	(Firm	City)		
This warranty card must customer support.	t be on file with	Howard W. S	Sams as a co	ndition for
How many disc drives do	you own? 5¼ "	8″	Hard_	
Memory size?	K			
Languages used, primarysecondary				
Do you use CP/M?				
I learned about [Howard W. Sams [software products [through: [Direct mail	☐ User butors ☐ Mag	rs group gazine ad	
I read the following mad	azines:			
				E
Your name (Please Print)				
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City			State	Zip

PROPER POSTAGE REQUIRED FOR DELIVERY

HOWARD W. SAMS & CO., INC. 4300 West 62nd Street Indianapolis, Indiana 46268

ATTN: Software Development Department