

**Appendix 2
Application Forms**

Request for Assignment of a License Extension*

Please send me/us a quote for extending the license

Font name	Number of currently licensed Workstations	Number of Workstations additionally required
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

* A license extension is needed if the Font-Software is desired to be used on more Workstations than stated in the Font-Software License Agreement.

Licensee:

First, last name	_____	Company	_____
Department	_____	Street	_____
ZIP, City, State	_____	Country	_____
Tel / Fax	_____	E-Mail	_____
Date	_____	Signature	_____

Please make copies as required and send a copy to

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Werner-Reimers-Straße 2-4
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Fax +49 (0) 6172 484-429
Sales@linotype.com

or an authorized Linotype sales partner.

You will receive a quote from Linotype GmbH or an authorized Linotype sales partner.