

1 Invoice address

If the **invoice** should be sent to an address other than the one given in Form 1.10, please enter it below:

Language of correspondence:

german english

Company/Name:

Street:

Postcode,
town:

Postcode,
P.O. Box:

Postcode,
town:

State,
country:

Tel.:

Fax:

E-Mail:

Please note:

The registered company will be obliged to settle the invoice if the recipient of the invoice fails to effect payment.

**2 Address for correspondence –
 if different from Main Exhibitor**

If **correspondence** should be sent to an address other than the one given in Form 1.10, please enter it below:

Language of correspondence:

german english

Company/Name:

Street:

Postcode,
town:

Postcode,
P.O. Box:

Postcode,
town:

State,
country:

Tel:

Fax:

E-Mail:

Please note:

The event organizer will use and proceed the information provided in this form within the framework of the fulfilment of contractual duties via an automated procedure that takes the regulations stipulated under the Federal Data Protection Law of the Federal Republic of Germany into account.

