

COST ACCEPTANCE & APPROVAL AGREEMENT

The Undersigned will adhere to the following guidelines which specify the terms and conditions under which Alberta Finance, Statistics will provide the requested products/service.

REQUESTED BY:		INVOICE TO SAME _	INVOICE TO SAME OR:	
Name:				
Department/Company:				
Address:				
City/Town:				
Province:				
Postal Code:				
Telephone:	FAX:			
DESCRIPTION OF PRODUCT/SERVIC	Æ			
2003 Alberta Economic Multipliers Put	2003 Alberta Economic Multipliers Publication @\$150.00			
2003 Alberta Economic Multipliers CD ROM @ \$150.00		\$		
2003 Alberta Economic Multipliers E-N				
E-Mail Address:		\$		
2003 Multipliers Publication and CD ROM @ \$250.00		\$		
Plus GST @ 6% (GST Registration # 124072513)		\$		
Total Payment		\$		
Payment Options:				
Please Send Invoice or Please Char	rge to My: VISA	_ MasterCard		
Card Number:		Expiry Date (mmyy):		
Name of Card Holder:		_		
Signature:		Date:		

PRODUCT/SERVICE SUPPLY & UTILIZATION CONDITIONS

- 1. Alberta Finance, Statistics is the owner of all intellectual property rights described above unless otherwise stated. The Undersigned will be granted a license to use these products/services subject to the terms outlined below.
- 2. The products/services provided are for internal use only and not for resale or distribution outside the department/agency (narrowly defined) of the Undersigned.
- 3. It is the responsibility of the Undersigned to ensure that the use of these products/services complies with all terms and conditions of this agreement, and to seek prior written permission from Alberta Finance, Statistics for any use not directly specified.
- 4. By signing this agreement the Undersigned accepts the price quote for these products/services and the conditions outlined for their use. All products/services are supplied as specified and are not warranted by Alberta Finance, Statistics against any errors, omissions or material changes required in fulfilling the substance of this agreement.
- 5. The Undersigned agrees to source Alberta Finance, Statistics, where appropriate, as the provider in any publication, report or analyses employing this information.

Name of Authorized Officer:

Signature:

Date:

If you have any questions, please call (780) 427-3099. FAX completed form to (780) 427-0409.