

Ship to Address:**Customer ID:****Bill To Address:****AGENT ID**

Attention: _____

Title: _____

Institution: CDL

Address: University of California Office of the President

City: Oakland

State/Province: CA

Zip/Postal Code: 94612

Country: _____

Telephone: _____

Fax: _____

E-Mail Address: _____

Attention: _____

Title: _____

Institution: CDL

Address: C/O UC San Diego

City: San Diego

State/Province: CA

Zip/Postal Code: 92903

Country: USA

Telephone: _____

Fax: _____

E-Mail Address: _____

PO#:

Tax Exempt or VAT numbers #:

*Special Please explain if there are any changes to an existing subscription or subscription term:***IP Authentication:**

User/Department Name	IP Ranges

Referring URL: (all referring urls should provide secured authentication)**Barcode Authentication:** (not available for all products)

Barcode Scheme	Dynix	DRA	Prefix(es):	Total Length:

Sales Representative:	
Territory Number:	
Telephone:	
Email Address:	

Fax or Email Orders To

Fax Number: 877-337-7015

Email: orders@proquest.com

Please fax or email signed contract to: fax: 877-337-7015 email: orders@proquest.com

ProQuest, 789 E Eisenhower Pkwy, Ann Arbor, MI 48108 phone: 800-521-0600

N=New R=renew U=Upgrade ORDER TYPE	Product Code	Product Name	Start Date (mm/dd/yy)	End Date (mm/dd/yy)	FTE/Tier	Price
					Total:	

Special Billing Instructions/Additional Elements:

Combined Order Total:

☐ Yes ☐ No Chadwyck-Healey • Culture Grams • eLibrary • Micromedia ProQuest • ProQuest • SIRS

☐ Yes☐ No

Chadwyck-Healey • Culture Grams • eLibrary • Micromedia ProQuest • ProQuest • SIRS

Special Billing Instructions/Additional Elements: We're adding UC Santa Cruz to the existing CDL July Fil renewal. UCSC is a new order and the renewal piece is for Berkely, Davis, Irvine, LA, San Diego, Merced, Riverside, Santa Barbara - San Francisco is

CSA Products

☐ No☐ New/New ☐ New/Core

CSA • COS (database only)

Customer ID:

Username/pwd

Subscribing Institution: California Digital Library	
Authorization by Customer (Licensee):	
Signature: _____	Duly Authorized Signature _____
Name: _____	_____
Title: Director, Bus. Svcs.	Manager
Date Signed: 2/27/08	

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ProQuest Customer Order Form