

Order

Client

Atlantis
Translation Services Ltd.



Tel. 041/631 03 40
Fax 041/631 03 44

Department: _____

Contact: _____

Tel.: _____

Fax: _____

Ref: _____

ATLANTIS

Translation Services Ltd.
Landweg 1

CH-6052 Hergiswil

Date: _____

Deadline:	Source language:	Target language(s):	Source text:	Delivery by:
<div style="border: 2px solid black; height: 30px; width: 100%;"></div>	<input type="checkbox"/> English <input type="checkbox"/> German <input type="checkbox"/> French <input type="checkbox"/> Italian <input type="checkbox"/> Spanish <input type="checkbox"/> Portuguese <input type="checkbox"/> _____	<input type="checkbox"/> German <input type="checkbox"/> English <input type="checkbox"/> French <input type="checkbox"/> Italian <input type="checkbox"/> Spanish <input type="checkbox"/> Portuguese <input type="checkbox"/> _____	<input type="checkbox"/> Manuscript <input type="checkbox"/> As attached <input type="checkbox"/> Photocopy <input type="checkbox"/> Other: _____ _____ _____	<input type="checkbox"/> Modem <input type="checkbox"/> e-mail <input type="checkbox"/> Diskette <input type="checkbox"/> Fax <input type="checkbox"/> Post <input type="checkbox"/> _____
No of pages: _____				
Subject area(s): _____				
____ pages of background material		<input type="checkbox"/> for our files	<input type="checkbox"/> please return	

Please check that the documents are complete and legible!

Instructions:

Use:

internal external to be printed to be copied

Additional services:

Authentication Glossary DTP/Layout Revision

Preparation for printing File conversion, target format: _____

Please send us more order forms

Signed: _____

Our general terms and conditions apply to all translation and interpreting services.

ATLANTIS should like to thank you for your order and looks forward to working with you again in the future!