

## Owner Warranty Card

Please complete and mail this card within 10 days of purchase to validate the warranty, and to receive the latest information on the INTERLOGIC™ Prose Group and game-playing accessories.

Name \_\_\_\_\_

Company \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Occupation \_\_\_\_\_ Age: \_\_\_\_\_

Program name \_\_\_\_\_ Date purchased \_\_\_\_\_

Serial number (if applicable) \_\_\_\_\_

Purchased from \_\_\_\_\_

Comments about program \_\_\_\_\_

Computer brand \_\_\_\_\_ Date purchased \_\_\_\_\_

Memory size \_\_\_\_\_ K Number of disk drives \_\_\_\_\_

Do you  Own  Share  Use at work/school

How much computer experience do you have?

Very little  Some  A lot  Write own programs

Total number of software products purchased for above computer \_\_\_\_\_

Total number of games purchased for above computer \_\_\_\_\_

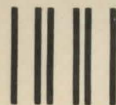
Indicate those application areas where you use or intend to use your computer, from most (1) to least (10).

- |   |  |
|---|--|
| <input type="checkbox"/> Entertainment        | <input type="checkbox"/> Calculations              |
| <input type="checkbox"/> Personal finance     | <input type="checkbox"/> Business bookkeeping      |
| <input type="checkbox"/> Personal information | <input type="checkbox"/> Other business uses       |
| <input type="checkbox"/> As a hobby           | <input type="checkbox"/> Writing computer programs |
| <input type="checkbox"/> Word processing      | <input type="checkbox"/> Education (school & home) |
| <input type="checkbox"/> Other _____          |  |

I'm interested in the following types of software products: \_\_\_\_\_

# INFOCOM™

Infocom, Inc., 55 Wheeler St., Cambridge, MA 02138



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# BUSINESS REPLY CARD

FIRST CLASS

PERMIT NO. 1281

CAMBRIDGE, MA 02138

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NO POSTAGE  
NECESSARY  
IF MAILED IN THE  
UNITED STATES

*Postage will be paid by addressee*

## INFOCOM

55 Wheeler St.  
Cambridge, MA 02138

