

Sample Form - iText Example

Sample use only. The information provided is returned to the sender in FDF format. Null entries are dropped.

First Name:

Middle Name:

Last Name:

Street, R.D. or P.O. Box:

City:

State:

9-digit Zip Code:

Telephone:

E-mail Address:

Questions? Comments? Please contact the Author at wsegrave@mindspring.com.
Thank you for your support.

Revision History: / 11Oct2006 - Original issue /

Visitor Statistics: Since the counter was added, this page has been visited many times.

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