



AccessTucson

# Facil Software Order Form

124 E. Broadway Tucson, AZ 85701-2012

Ph: (520)624-9833 Fax: (520) 792-2565

## Contact Information

Organization Name \_\_\_\_\_

Contact Name \_\_\_\_\_ Title \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_\_ Ext. \_\_\_\_\_ Fax (\_\_\_\_) \_\_\_\_\_

Email \_\_\_\_\_

## Licensing Information

Organization Name \_\_\_\_\_

(maximum 40 characters)

Generic organization names, such as Community Media Center, can not be accepted.

Please provide a specific name, such as Springfield Community Media Center.

Organization Name Abbreviation \_\_\_\_\_

( maximum 8 characters)

This information will appear on screens, reports, and receipts

## Product/License Selection

Facil Single User	<input type="checkbox"/>	\$1,395
Facil Multi User	<input type="checkbox"/>	\$2,695
Facil Centro Single User	<input type="checkbox"/>	\$995
Facil Centro Multi User	<input type="checkbox"/>	\$1,895

### Upgrade:

Facil Single User to Facil Multi User	<input type="checkbox"/>	\$1,300
Facil Single User to Centro Multi User	<input type="checkbox"/>	\$500
Centro Single User to Centro Multi User	<input type="checkbox"/>	\$900
Centro Single User to Facil Single User	<input type="checkbox"/>	\$400
Centro Single User to Facil Multi User	<input type="checkbox"/>	\$1,700
Centro Multi User to Facil Multi User	<input type="checkbox"/>	\$800

Web Interface	<input type="checkbox"/>	\$995
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## Method of Payment

Check       P.O. # \_\_\_\_\_

Visa       Master Card

Credit Card number \_\_\_\_\_ Exp. date \_\_\_\_\_

Signature \_\_\_\_\_