

Please complete a separate form for each EFIN and location.

* = Required Fields

235 East Palmer Street • Franklin, NC 28734-3049 • 800.890.9500 • Fax 828.369.9928

| | |
|-------------------------|---|
| *Firm Name _____ | Shipping Address, if Different (no post office boxes) |
| *DBA _____ | Address Line 1 _____ |
| *Primary Contact _____ | Address Line 2 _____ |
| Secondary Contact _____ | City, ST, ZIP _____ |
| *Address Line 1 _____ | Delivery Instructions for UPS (100 characters or less): |
| Address Line 2 _____ | _____ |
| *City, ST, ZIP _____ | _____ |

| | |
|--|--|
| *# of Additional Sites for Firm _____ | Drake Account # _____ |
| *Owner(s) of Firm _____ | *Primary Phone # _____ |
| *EIN _____ or *SSN _____ | Cell Phone # _____ |
| *Email Address _____ | Fax # _____ |
| *Entity Type <input type="checkbox"/> Individual/Sole Proprietor <input type="checkbox"/> Corp | Previous Accounting Software Used |
| <input type="checkbox"/> LLC-Corporate <input type="checkbox"/> Other <input type="checkbox"/> Tax-Exempt <input type="checkbox"/> Partnership | _____ |
| <input type="checkbox"/> LLC-Single Member <input type="checkbox"/> LLC-Partnership | How Did You Learn About Drake? (i.e. ad, show, seminar, website, peer, etc.) |
| ** If you haven't already done so, please fax your IRS e-file Application Summary to 828.349.5733. | _____ |

| CHOOSE YOUR PRODUCT | COST | # OF SITES | TOTAL |
|--|----------------|------------|--------------------------|
| <input type="checkbox"/> Drake Accounting 2022 - Professional Edition (accounting & payroll solution)\$ _____ | | | \$ _____ |
| April-May 2021 - \$595 June-July 2021 - \$645 August-September 2021 - \$695 October-November 2021 - \$745 December 2021 - \$795 | | | |
| <input type="checkbox"/> Drake Accounting 2022 - Forms Edition (included in the Professional Edition)\$ <u>395</u> | | | |
| <input type="checkbox"/> Drake Accounting 2021 - Professional Edition (accounting & payroll solution)\$ <u>795</u> | | | |
| DELIVERY | | | |
| Download Only (no CDs)..... | \$ <u>FREE</u> | | \$ <u>FREE</u> |
| Sales Tax - All States & Jurisdictions (except : AK, AR, CA, DE, FL, GA, ID, MO, MT, NH, NJ, NV, OK, OR, SC, and VA) | | | SUBTOTAL \$ _____ |
| State, County, and City Sales Tax based on Shipping Address and Delivery Method - Enter Total Rate _____ % = | | | \$ _____ |
| | | | TOTAL \$ _____ |

I agree to the terms and conditions of the Drake Software 2022 License and Non-Disclosure Agreement.

* _____ *

Signature Required _____ Date of Order _____

Print & Sign (emailed order forms will **not** be accepted)
License agreement: DrakeSoftware.com/PDF/daslicense2022.pdf
System requirements: DrakeSoftware.com/PDF/dassysreq2022.pdf

CHECK VISA MASTERCARD DISCOVER AMEX

Card Number: _____

Exp Date: _____ CW _____

CC Billing Address: _____

Make Checks Payable To: **Drake Software**
(\$25 charge and termination
of service for returned checks) **Attn: Accounting**
235 East Palmer Street
Franklin, NC 28734-3049

Cardholder's Name _____

Signature _____

Print & Sign (emailed order forms will **not** be accepted)