

UPGRADE TODAY!

License Information

	Pro Edition	Premier Edition	Amount
Single-user Upgrade	\$249	\$349	
2-User Upgrade	\$349	\$449	
3-User Upgrade	\$399	\$549	
4-User Upgrade	\$449	\$649	
5-User Upgrade	\$499	\$749	
10-User Upgrade	\$749	\$1,249	
15-User Upgrade	\$999	\$1,749	
20-User Upgrade	\$1,249	\$2,399	
40-User Upgrade	\$2,249	\$4,249	
60-User Upgrade	\$3,249	\$6,249	

Don't see the license you need? Call to customize your own multi-user package 1-800-874-8801

Annual Software Enhancement Plan

	Pro Edition	Premier Edition	Amount
Single-user Plan	\$150	\$210	
2-User Plan	\$210	\$270	
3-User Plan	\$240	\$330	
4-User Plan	\$270	\$390	
5-User Plan	\$300	\$450	
10-User Plan	\$450	\$750	
15-User Plan	\$600	\$1,050	
20-User Plan	\$750	\$1,350	
40-User Plan	\$1,350	\$2,550	
60-User Plan	\$1,950	\$3,750	

Call to customize your own multi-user package 1-800-874-8801

Special Offers

Increase Productivity with Additional ABS Software Titles	Amount
Customer Appointment Manager appointment scheduling software	Single-user license \$235 (reg. \$295)
Staff Files human resource software	Single-user license \$235 (reg. \$295)

Multi-user versions available. Call today for special pricing! Visit www.abs-usa.com for product information.

Shipping

Shipping Method	Your Price	Amount
Ground	\$9.95	
3 Day	\$15.00	
2 Day	\$25.00	
Next Day	\$35.00	
International	Call 1-701-235-5226	

Subtotal:

ND and IN residents please add applicable state and local sales tax, **TAX:**

Tax Exempt No:

Total:

Annual Software Enhancement Plan

We're committed to providing world-class service and support. Add an Annual Software Enhancement Plan today and enjoy the peace of mind you deserve. With the Annual Enhancement Plan you will receive:

- **Free** upgrades
- **Free** media replacement if your software becomes lost or damaged
- **Free** unlimited telephone and e-mail access to our support technicians

Download now: www.abs-usa.com/vsspro14

Call toll-free: **1-800-874-8801**

Fax this order form: **1-701-280-0842**

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Atlas Business Solutions

PO Box 9013, Fargo, ND 58106-9013

Shipping Information

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COMPANY _____

ADDRESS _____

CITY _____

STATE _____ ZIP _____

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Payment Information

Please check choice

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☐ MasterCard ☐ Discover/Novus

☐ Check

☐ Purchase Order # _____ *

CARD NUMBER _____

EXPIRATION DATE _____

CARDHOLDER NAME _____

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*Copy of Purchase Order must accompany this form

