

Please complete a separate form for each EFIN and location.

\* = Required Fields

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|                                |                                                                               |
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| *Firm Name _____<br>*DBA _____ | Shipping Address, if Different (no post office boxes)<br>Address Line 1 _____ |
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| Secondary Contact _____        | City, ST, ZIP _____                                                           |
| *Address Line 1 _____          | Delivery Instructions for UPS (100 characters or less):<br>_____<br>_____     |
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|                                                                                                                                                                                                                                                                                                                                         |                                                                                       |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|
| *# 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<br><input type="checkbox"/> LLC-Corporate <input type="checkbox"/> Other <input type="checkbox"/> Tax-Exempt <input type="checkbox"/> Partnership<br><input type="checkbox"/> LLC-Single Member <input type="checkbox"/> LLC-Partnership | Previous Accounting Software Used<br>_____                                            |
| ** If you haven't already done so, please fax your IRS e-file Application Summary to 828.349.5733.                                                                                                                                                                                                                                      | How Did You Learn About Drake? (i.e. ad, show, seminar, website, peer, etc.)<br>_____ |

| CHOOSE YOUR PRODUCT                                                                                                                                                                                                                                      | COST           | # OF SITES | TOTAL              |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|------------|--------------------|
| <input type="checkbox"/> <b>Drake Accounting 2021 - Professional Edition</b> (accounting & payroll solution)<br>April-May 2020 - \$595   June-July 2020 - \$645   August-September 2020 - \$695<br>October-November 2020 - \$745   December 2020 - \$795 | _____          | _____      | _____              |
| <input type="checkbox"/> <b>Drake Accounting 2021 - Forms Edition</b> (included in the Professional Edition)                                                                                                                                             |                |            |                    |
| <b>DELIVERY</b>                                                                                                                                                                                                                                          |                |            |                    |
| <b>Download Only</b> (no CDs).....                                                                                                                                                                                                                       | \$ <b>FREE</b> |            | \$ <b>FREE</b>     |
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| State, County, and City Sales Tax based on Shipping Address and Delivery Method - Enter Total Rate _____ % =                                                                                                                                             |                |            | _____              |
|                                                                                                                                                                                                                                                          |                |            | <b>TOTAL</b> _____ |

I agree to the terms and conditions of the Drake Software 2021 License and Non-Disclosure Agreement.

\* \_\_\_\_\_ \*  
Signature Required Date of Order

Print & Sign (emailed order forms will **not** be accepted)  
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System requirements: DrakeSoftware.com/PDF/dassysreq2021.pdf

Make Checks Payable To: Drake Software  
(\$25 charge and termination 1914 South 'S' Street  
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