ABS 3 <sub>®</sub> Order	Form	Rev 1/25	Who Referred you to	O US:			
Agency Business System				cybusys.com			
				e: 503 659 6752 503 652 6897			
Agent Information: Not		ll he confirmed			aint leaibly		
Agent Information. Not	e. All of dels wi	ii be confii med	by phone. Fleus	e Type, or pr	Title legibly.	•	
Agency Name			Db.o.				
Agent Name:				ne:			
rigent rumer			Fax:	<u> </u>			
Address:			 F-m	ail			
City, State Zip:							
ABS Agency Builder: All li				Quarterly and Sp	lit Paymont Pla	ne are availe	phla (halaw) @
INSTRUCTIONS: indicate the amou						Split <sub>3</sub>	Quarterly
whatever options you wish. Make s items.	ure to include the se	etup fee when enter	ing the total. Use the	same plan for all	Annual*	Spiit®	Quarterly
☐ ABS Agency Builder – One Time, New order Setup Fee① Must be paid in full regardless of payment plan.					\$260.00	\$260.00	\$260.00
3 user annual license (can be installed on any number of computers. Simultaneous user limit: 3).②					\$710.00	\$360.00	\$185.00
☐ 6 user annual license (can be installed on any number of computers. Simultaneous user limit: 6).②					\$870.00	\$444.00	\$226.00
9 user annual license (can be installed on any number of computers. Simultaneous user limit: 9).②				\$1,150.00	\$586.00	\$300.00	
12 user annual license (can be installed on any number of computers. Simultaneous user limit: 12). ②				\$1,450.00	\$740.00	\$380.00	
☐ Unlimited user annual license (can be installed on any number of computers. Simultaneous user limit: None).②					\$1,800.00	\$940.00	\$470.00
ABS Document Manager annual license. ② This option saves documents from scanners, digital cameras, and most e-mail attachments. Documents are linked to accounts, policies & family members. <i>Not licensed separately.</i>					\$170.00	\$87.00	\$45.00
ABS Receipt Manager annual license. This option prints premium payment receipts, and end-of-day settlement reports for Carrier payment and Trust Account deposits. Not licensed separately.					\$170.00	\$87.00	\$45.00
				TOTAL:			
<ul><li>* Use only one of these amounts ba</li><li>① Setup fees are one time only when</li></ul>						on.	
<ul> <li>Annual License Fee means this am</li> <li>Split means ½ down and the remains</li> </ul>	•	•	•	•	ent Plan has beer	selected (fro	m above).
,	,	J	. , ,				
Note: Data conversion from another n	nanagement system or	other source is done o	n a time and materials b	pasis, and not covere	ed by this order fo	orm.	
Authorization:	VISA [	Master Card	□ AMEX	□ Che	eck (Authorize	ed Signature	required)
					•	J	, ,
Card Number:				Expire	s:	_/	
MM/YY Name on card:				Security Code	(back of card):		
Billing Address for this card	d (where the cred	it card invoice is n	nailed).				
Diming Address for time care	a (vinere are erea		nanea).				
					Do no	t email cr	edit
City, State Zip:					card p	ayments.	
This is an annual renewable co				sary and the Payn	nent Plan will c	ontinue until	canceled or
All orders require a valid signa selected payment plan. It also ac document.							
Signature:				DAT	E:		