



Product Order Form

Acumatica Partner: _____

Acumatica Partner Contact for the Order: _____

Client Information

Client Acumatica Site Name: _____

Client Installation ID: _____

Client Contact Name: _____ Client Contact Phone Number: _____

Client Contact Email: _____

Client Address: _____ City: _____ State: ____ Zip: _____ Country: _____

Acumatica Version #: _____ Acumatica System Size: _____

URL of Client Acumatica System: _____

Rockton Pricing Management for Acumatica

Implementation Fee Required Based on System Size

- | | |
|---|--------|
| <input type="checkbox"/> S = \$599/month | \$4999 |
| <input type="checkbox"/> M = \$699/month | \$5999 |
| <input type="checkbox"/> L = \$799/month | \$6999 |
| <input type="checkbox"/> XL = \$899/month | \$7999 |
| <input type="checkbox"/> Enterprise = \$999/month | \$8999 |

Total List Price (including implementation fee): _____



Payment Information

Promo Code & Sales Person: _____

Purchase Order for Invoice: _____

Credit Card Type: Visa MasterCard AMEX

Credit Card Number: _____ Exp Date: _____ CV Code: _____

Billing Address: _____ City: _____ State: _____ Zip: _____ Country: _____

Please email completed form to sales@rocktonsoftware.com