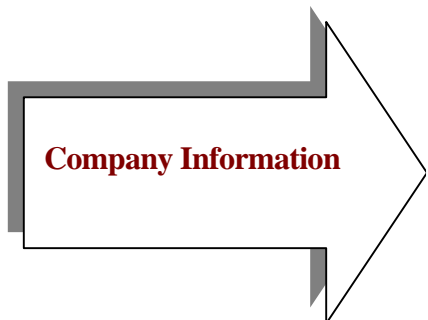


**TeleInfoSystems, Inc.**  
 10561 Barkley, Suite 550  
 Overland Park, Kansas 66212  
 Phone: (913) 599-3236 Fax: (913) 599-3737

**RMS v3.x ORDER FORM**

*Please send me Revenue Management System (RMS) Version 3.x:*



Name(s) \_\_\_\_\_  
 Company \_\_\_\_\_  
 Address \_\_\_\_\_  
 City, State, Zip \_\_\_\_\_  
 Telephone \_\_\_\_\_ Fax \_\_\_\_\_  
 E-mail address \_\_\_\_\_  
 Authorized Signature \_\_\_\_\_

**Study Area Information**

	Study Area Name	State	Study Area Number
	I) _____	_____	_____
Additional Study Areas	1) _____	_____	_____
	2) _____	_____	_____
	3) _____	_____	_____
	4) _____	_____	_____

**Price List**

Full Version (Initial Study Area):	\$ 7,500	Additional Full Version SA(s):	\$ 1,500 ea.
Upgrade From Any Prior Version (Initial SA):	\$ 1,500	Additional Study Area Upgrade(s):	\$ 500 ea.

**License Fees**

Full Version or Upgrade from RMS v\_\_\_\_\_ Base License Fee (Initial Study Area): \$ \_\_\_\_\_

\_\_\_\_\_ Additional Full Version Study Area(s) at \$ 1,500 each: \$ \_\_\_\_\_

\_\_\_\_\_ Additional Study Area Upgrade(s) at \$ 500 each: \$ \_\_\_\_\_

**Total RMS© License Fee: \$ \_\_\_\_\_**

**Optional Maintenance**

- YES, I am interested in receiving information about an Optional Maintenance Services Agreement for RMS.
- NO, I am not interested in an RMS Optional Maintenance Services Agreement at this time.

Please fax this completed form to (913) 599-3737.