



www.PowerofAppeals.com
 www.AppealSolutions.com
 www.AppealLettersOnline.com

Appeal Solutions Order Form

Appeal Solutions, Inc
 17387 E 1090 RD
 Sweetwater, OK 73666
 (P) 888-399-4925
 (F) 866-866-4394
 sales@appealsolutions.com

Power of Appeals Software		Nuber of users	Monthly	Annual (10% Disc.)	Total
---------------------------	--	----------------	---------	-----------------------	-------

The Power of Appeals Software Subscription includes lifetime software and appeal letter updates, and a membership to AppealLettersOnline.com. Monthly billing requires a minimum of 3 months.

<input type="checkbox"/>	Power of Appeals 1-User License	1	\$79	\$853	
<input type="checkbox"/>	Power of Appeals Additional User Licenses		\$60ea	\$648ea	

AppealLettersOnline.com Membership		Nuber of users	Monthly	Annual (16% Disc.)	Total
------------------------------------	--	----------------	---------	-----------------------	-------

The AppealLettersOnline.com subscription includes unlimited access to 1600+ appeal letters, denial management resources & more. Monthly billing requires a minimum of 12 months.

<input type="checkbox"/>	AppealLettersOnline.com 1 Member	1	\$27.95	\$279	
<input type="checkbox"/>	AppealLettersOnline.com Additional Members		\$21.95ea	\$219ea	

Send Completed Order Form To: Appeal Solutions, Inc 17387 E 1090 RD • Sweetwater, OK 73666 Email: sales@appealsolutions.com	Or call toll free to order: 1-888-399-4925 24-Hour FAX: 866-866-4394 or Online at www.appealsolutions.com	Code: 081511 Subtotal Sales Tax (TX Only) 8.75% Order Total
--	--	---

Contact Information	Payment Options
Organization _____ Address _____ City _____ State _____ Zip _____ Phone _____ Fax _____ Contact _____ E-Mail _____ Specialty _____	<input type="checkbox"/> Check Enclosed. Payment by check is not available for monthly payment plans. <input type="checkbox"/> Charge my: <input type="checkbox"/> AmEx <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard Card Number _____ Exp Date _____ Signature _____ <p>By signing this Credit Card Billing Authorization Form the individual executing this form on behalf of the Buyer represents and warrants to Appeal Solutions, Inc. That he/she is authorized by the Buyer to make purchases and that the information set forth above is accurate and complete. By signing this form the signer also acknowledges that he/she has read and will abide by the Terms of Membership Agreement located on our website.</p>