



ALL the official forms, checklists and guidelines in a comprehensive Probate System co-developed and endorsed by the Bar Association  
 Developed by Basha Systems LLC



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## Probate System V Order Form

Client agrees to purchase the following software and services indicated below. If Client checks the box for payment by credit card, Client agrees to pay the total amount shown below in compliance with the Client's cardholder agreement.

Authorized	Description of Service	Price	Amount
<input type="checkbox"/>	<b><u>PSV-4. Software and Installation (4 files):</u></b> GhostFill software, application license, automated forms, and four (4) estate files. After placing your order, contact Basha Systems to schedule an appointment to install the Probate System V remotely on your firm's network. ....	\$200	_____
<input type="checkbox"/>	<b><u>PSV-1. Quick Order (1 file):</u></b> Want to pay as you go? Purchase a single estate file and disburse the expense to your client.....	\$50	_____
<input type="checkbox"/>	<b><u>PSV-5. Bulk Purchase (5 Files):</u></b> Plan ahead. Purchase five estate files. Be prepared when the next probate case comes in .....	\$250	_____
<input type="checkbox"/>	<b><u>PSV-10. Active Practice (10 Files):</u></b> Have an active probate practice? Take advantage of volume discounts. Save 10% over single file purchase price. ....	\$450	_____
<input type="checkbox"/>	<b><u>PSV-25. Busy Practice (25 Files):</u></b> Work coming in faster than you can handle? Purchase 25 files in advance. Save 20% over single file purchase price. ....	\$1,000	_____
<input type="checkbox"/>	<b><u>PSV-50. Multi-Lawyer Practice (50 Files):</u></b> Practice with other attorneys? Consider purchasing 50 files for your office. Save 30% over the single file purchase price.....	\$1,750	_____
<input type="checkbox"/>	<b><u>PSV-100. Large Firm Practice (100 files):</u></b> Work at a large firm with a high-volume of probate actions? Consider purchasing 100 files at a discount of 50% off the single file purchase price. ....	\$2,500	_____
<b>TOTAL:</b>			_____

Contact: \_\_\_\_\_

Firm Name: \_\_\_\_\_

Telephone: \_\_\_\_\_

Address: \_\_\_\_\_

E-mail: \_\_\_\_\_

Client is: <input type="checkbox"/> Individual OR <input type="checkbox"/> Law Firm		Method of Payment: <input type="checkbox"/> Check <input type="checkbox"/> Amex <input type="checkbox"/> Visa <input type="checkbox"/> MC	
Agreed and Accepted by:		Method for Payment of Monthly Invoices (due on Receipt)	
Law Firm: _____		<input type="checkbox"/> Debit to Credit Card Below <input type="checkbox"/> Check or Certified Funds	
Individual: _____		Name on Card: _____	
(I am a partner/shareholder authorized to sign for firm)		Credit Card No: _____ CCV #: _____	
/ /		Expiration Date: _____ / _____ Zip Code: _____	
Dated _____ Signature to Agreement		Signature Authorizing Use of Credit Card	