

AKA SOFTWARE SERVICES, INC.

P.O.P.S.S. Questionnaire

Company _____

Date _____

Address _____

City _____ Zip _____

Name _____

E-mail _____

Phone _____ Extention _____ Fax _____

Please CHECK the appropriate boxes

❖ I am interested in using **P.O.P.S.S.** at my company..... Yes No
Approximately how many users will there be?

Less than 5 From 6 to 10 From 11 to 20 From 21 to 40 From 41 to 60 Over 60

❖ Send me Pricing information..... Yes No

❖ I am interested in **P.O.P.S.S.** but need more information. Yes No

Have an individual On-Line Demo of **P.O.P.S.S.** Speak directly to AKA Software about **P.O.P.S.S.**

Other issues and questions (list below)

This form can not be filled out online. Please print it out and fill it in. Then it can be either scanned and email back to AKA SOFTWARE SERVICES, INC @ jon@akaware.com or be faxed to AKA SOFTWARE SERVICES, INC.

Fax To: (973) 720 - 6538