



724 Jules St. Saint Joseph, MO 64501 | phone: 816.232.9095 | fax: 816.676.7680 | www.oltpro.com | email: oltpro@olt.com

Contact Name:

Firm Name:

Billing Address:

Address 2:

City/State/Zip:

EFIN: [] in progress

Email

Date:

Bank: Approx. Volume:

Web-Based 2023TY Software

Unlimited Return Package

4/1/2023-6/30/2023	\$549.00
7/1/2023-7/31/2023	\$649.00
8/1/2023-8/31/2023	\$749.00
9/1/2023-3/31/2024	\$849.00

25 Return Package

4/1/2023-6/30/2023	\$349.00
7/1/2023-7/31/2023	\$399.00
8/1/2023-8/31/2023	\$449.00
9/1/2023-3/31/2024	\$499.00

Desktop 2023TY Software (download only)

Unlimited Return Package:

4/1/2023-6/30/2023	\$699.00
7/1/2023-7/31/2023	\$799.00
8/1/2023-8/31/2023	\$899.00
9/1/2023-3/31/2024	\$999.00

I want to purchase Web-Based Software: [] Unlimited [] 25 Return

I want to purchase Desktop Software: [] Software Total \$ _____

***Refund Policy-Within 30 days of purchase with written request.*

Payment Method:

Credit Card [] Visa [] MasterCard [] Discover [] Amex

Card Number: _____

Expiration Date: _____

Security Code: _____

Card Holders Name (Please Print)

Card Holders Signature

[] Check Check Number: _____

Make Checks Payable to:
On-Line Taxes, Inc.
724 Jules Street
Saint Joseph, MO 64501

Purchase Date: _____



ELECTRONIC FILING

A copy of your Electronic Filing Identification Number (EFIN) summary is required. Once the EFIN is verified the account will be activated to electronically file tax returns with the IRS and/or state(s). If the office has more than 1 EFIN, an EFIN summary is required for each EFIN.

By signing below, I agree to the Electronic Filing terms above.

Signature Required

Printed Name

EFIN(s)

Date