HN ACCOUNTS SPECIFICATION FORM

Customer's Name :

Telephone Number : Fax Number :

COMPANY TITLE :
(Max. 50 Characters)

Requested Delivery Date : / /

ACCOUNTS TYPE	Full
STARTING DAY YEAR/MONTH/DAY	
Number of TRADERS	(Range 6 to 2502- Multiple of 3)
Number of STOCKS	(15 to 600 Multiple of 3)
Number of MANAGEMENT REPORTS	(8 to 150)
Last INCOME Account Codes	(6 to 2001 Multiple of 3)
Total Number of ACCOUNT CODES	(12 to 3000 Multiple of 3)
Number of ASSETS	(15 to 900 Multiple of 3)
BANK ACCOUNTS (Current Accounts)	(1 to 9)
VAT RETURNED ON CASH BASIS Y/N	

OPTIONAL EXTRAS

Auto payments	Y/N	Invoicing	Y/N	Jobcosting	Y/N
Chequewriting	Y/N	Multiple Bank Accounts	Y/N		

FOR OFFICE USE ONLY:

Type of disks : 3½"DD/HD NCS :

License Number : Date of Issue :

PLEASE RETURN TO HNL