

Affordable Housing Association of Indiana LIHTC Attorney Approved Lease Generation Software

PURCHASE ORDER FORM

Note: Complete the PROJECT INFORMATION SHEET for each project included in this software purchase.

The following Affordable Housing Association of Indiana Member has purchased the USDA/RD Approved Lease Generation Software.

Date Purchased:			
Member's Name:			
Mailing Address:			
City, State, Zip:			
Total No. of Projects that will be preloaded	into their software:	(Section A + B)	
The following section A & B will be used by Simply Computer Software, Inc. to determinumber for a group of projects at a central of	ne the number of CD-ROM's to b		
A. The following projects require on Number of Projects:(Attach a separate list of all project State, Zip, and number of units)		a specific project at site location. indicating Project Names, Address, City,	
B. The following project's require of computer location and will provide Number of Projects by centralized	the operator with a project sele	d by multiple projects from a central ction option to print forms.	
(Attach a list by grouping of all projects to b Address, City, State, Zip, and Number of U		nputer location indicating Project Names,	
BILL TO:			
Project/Company:	Phone:		
Mailing Address:			
City:	State:	Zip:	
Signature:			
Payment Information (Please check one)	[] BILL MY ACCOUNT	[] CHECK ENCLOSED	
PO# (If applicable):	Make checks payable to: Aff	ordable Housing Association of Indiana	
Return to: AHAIN, 530 S. 13 th Street, D	Decatur, IN 46733 Phone (86	6)546-7742 / (260)724-6493 Fax	



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PROJECT INFORMATION SHEET

The following information is required for each project that will be included in the lease generation software package distributed. Program information is pre-loaded and then shipped with the installation CD-ROM.

Date:				
SHIP TO:				
Contact Person:				
Project Name:				
Address:				
City:		State:	Zip:	
PROJECT'S PHYSICAL ADD	RESS:	Total Number of Units:		
Project Name:				
Address:				
City:		State:	Zip:	
PROJECT'S MAILING ADDR	ESS:			
Project Name:				
Address:				
City:		State:	Zip:	
Phone:	Fax:	Email:		

Return to: AHAIN, 530 S. 13th Street, Decatur, IN 46733 Phone (866)546-7742 / (260)724-6493 Fax