

VinSolutions 6405 Metcalf Ave Suite 400 Overland Park, KS 66202 www.vinsolutions.com

Sales and Support: 913-825-6124

Date

Invoice For

Marshall Motor Co (4959)

Invoice Number:OP#-00223379

Salesperson: Sarah Nugent Date Created: 11/27/2012

Products

Signature

Product	Description	Qty.	List Price	Sales Price	Sales Tax
Post Card 6" X 11"	Post Card 6" X 11" used for campaigns. Campaigns include a website banner, email template and landing page. Table tops, phone calls, hang tags and posters are extra.	4200.0	\$2,352.00	\$1,932.00	\$158.43
Postage 1st Class	Postage 1st Class. 4200.		\$1.890.00	\$1,890.00	\$154.98
Creative work - custom	Custom creative work, priced per hour	-		\$169.00	7-2-11/-0
Web site - Banner	Web site Banner for seasonal sales event campaign.	, r		7	
Web site - Landing Page	Creation of dealer's landing page for campaign purposes. Does not contain inventory. 1.0				
Email Template	Dealer Branded email template from our library.	1.0			
	Products/One T One Time Shipp One Time Sales Monthly Recurr Monthly Recurr	oing: Tax: ring: ring Sa	les Tax:	. ,	991.00 \$0.00 313.41 \$0.00
	Total Now Due Total Monthly *Tayes are subject to state and	Recur		,	\$0.00 304.41 \$0.00
	Total Monthly *Taxes are subject to state and	Recur	ons and are subjec	t to change	304.41
šthie invoice does not vortees or	*Taxes are subject to state and *Does not include Dealer-paid	Recur	ons and are subjec	t to change	304.41
*this invoice does not replace or	*Taxes are subject to state and *Does not include Dealer-paid	Recur	ons and are subjec	t to change	304.41







6405 Metcalf Ave. Suite 400 • Overland Park, KS 66202 • T: 1.800.980.7488 • F: 913.825.6396 • www.vinsolutions.com

VinSolutions 6405 Metcalf Ave Suite 400 Overland Park, KS 66202 (P) 913-825-6300 (F) 617-904-1618

Payment Authorization

The undersigned customer hereby authorizes VinSolutions, LLC to charge said account on our behalf. If selecting the Check by Fax option, we authorize VinSolutions to submit all pertinent information from this check to our bank for payment as check, and we understand that we are not required to submit the check to VinSolutions.

ONE	TIME	AUTHO	RIZATION
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Account Owners Name:			VinSolutions Account Number: 4959	
Address Line 1:			Phone Number:	
Address Line 2:			Fax Number:	
City:	State:	Zip:	Email:	
Opportunity ID: OP#-00)223379		Dollar Amount: \$4,304.41	

Visa Mastercard AmEx - Please circle one

Check by Fax

Cardholder Name: Card Number:

CHECK BY FAX INFORMATION (ACTUAL CHECK	
MUST ACCOMPANY THIS FORM) DO NOT MAIL	
Bank Name:	Bank Phone:
Name on Bank Acct:	Check Number:
Bank Routing Number:	Checking Account Number:

Expiration Date:

ACH (Electronic Debit)

,	
ACH (ELECTRONIC DEBIT) (VOIDED CHECK MUST	
ACCOMPANY THIS FORM)	
Bank Name:	Bank Phone:
Name on Bank Acct:	
Bank Routing Number:	
Checking Account Number:	

ACKNOWLEDGEMENT	
Authorized Name:	Title:
Authorized Signature:	Date: