

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

Sales and Support: 913-825-6124

Purchase Agreement Summary For

Jeff Schmitt Nissan (2398)

Agreement Number: OP#-00321197

Salesperson: Robert Bloomquist Date Created: 11/5/2013

Products

Product	Description		List Price	Sales Price	Sales Tax
Post Card 6" X 9"	Post Card 6" X 9" used for full service multi touch point campaigns. Uses traditional, digital and social media to drive consumers to your virtual and physical showroom/service drive. Digital marketing components are included on campaigns with 2500 or more targeted prospects and social medial components are included with 5000 or more targeted prospects.		\$3,952.00	\$3,952.00	\$266.76
Postage 1st Class	Postage 1st Class.	7904.0	\$3,556.80	\$3,556.80	\$240.09
SMM - Facebook and Twitter postings	Ties your social media to your marketing campaign to maximize the exposure and engagement of the targeted audience. Your cover photo and app image are updated with the campaign's artwork and we will post up to 10 Facebook and 20 Twitter promotional posts.	1.0			
Web site - Banner	Web site Banner for campaigns.	1.0			
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			

Total Monthly Recurring:	\$0.00
Total Now Due:	\$8,015.65
Monthly Recurring Sales Tax:	\$0.00
Monthly Recurring:	\$0.00
One Time Sales Tax:	\$506.85
One Time Shipping:	\$0.00
Products/One Time:	\$7,508.80

^{*}Taxes are subject to state and local regulations and are subject to change

^{*}Does not include Dealer-paid Travel Expenses related to onsite training

^{*}this invoice does not replace or supersede current billing

Signature			Date
☐ Check By Fax	☐ One Time ACH	☐ One Time Credit Card A	Authorization

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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.

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Account Owners Nam	ie:		VinSolutions Account Number: 2398
Address Line 1:			Phone Number:
Address Line 2:			Fax Number:
City:	State:	Zip:	Email:
Opportunity ID: OP#-	00321197		Dollar Amount: \$8,015.65

CREDIT CARD INFORMATION	
Cardholder Name:	Visa Mastercard AmEx - Please circle one
Card Number:	Expiration Date:

Check by Fax

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:

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: