

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

Sales and Support: 913-825-6124

Invoice For

Metro Ford (4057)

Invoice Number: OP#-00280284

Salesperson: Jeremy Bravard Date Created: 5/30/2013

Products

Product	Description	Qty.	List Price	Sales Price	
Website - DIY Ala Carte	Monthly fee for DIY (Do It Yourself) Website, includes mobile platform for Blackberry, iPhone, iPad and Android. Choose from one of three best practice themes with customizable colors and calls to action. Includes up to 40 pages of content, the ability for dealer to add up to five custom pages. Comes with Basic SEO through Inventory and Titles. Also includes VinLens, our website traffic tracker. Example theme is here: http://alpha.vinmanagersites.com		\$699.00	\$559.00	
Inventory Light	Limited inventory gallery, view inventory with ILM	1.0			
SEO - Basic	Search engine optimization includes long tail inventory keywords and the ability to control title updates.	1.0			
Website - Design Upgrade	Change web site to different look and feel.	1.0	\$799.00	\$559.00	
Inventory Light onetime fee	Onetime fee for limited inventory gallery, view inventory with ILM	1.0			
Website - DIY Ala Carte onetime fee	Website - Best Practice onetime fee to create site.	1.0	\$699.00		
SEO - Basic onetime fee		1.0			

Products/One Time:	\$559.00
One Time Shipping:	\$0.00
One Time Sales Tax:	\$0.00
Monthly Recurring:	\$559.00
Total Now Due:	\$1,118.00
Total Monthly Recurring:	\$559.00

^{*}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

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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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ONE TIME AUTHORIZATION					
ACCOUNT HOLDE	R INFORMATION				
Account Owners Name:			VinSolutions Account Number: 4057		
Address Line 1:			Phone Number:		
Address Line 2:			Fax Number:		
City:	State:	Zip:	Email:		
Opportunity ID: OP#	-00280284		Dollar Amount: \$1,118.00		
Credit Card Pa					
Cardholder Name:			Visa Mastercard AmEx - Please circle one		
Card Number:			Expiration Date:		

Check by Fax

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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)

ACKNOWLEDGEMENT	
Authorized Name:	Title:
Authorized Signature:	Date: