

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

Sales and Support: 913-825-6124

Invoice For

Gunther Mazda (5826)

Invoice Number: OP#-00222058

Salesperson: James Campbell Date Created: 11/26/2012

Products

Product	Description		List Price	Sales Price	
ILM Ala Carte	Internet Lead Management system manages all incoming internet leads. Includes: VinBrochure, reverse look-up, spam assassin and bad lead rejection. Includes mobile application for smart phones.		\$899.00	\$400.00	
Inventory Light	Limited inventory gallery, view inventory with ILM	1.0			
Data Integration	Data integration with dealer's DMS. Publishes Vehicle Inventory, F&I Deal History and Repair Orders when applicable.	1.0	\$99.00	\$99.00	
Email Banner	Email Banner	1.0			
Email Hosting	Hosting of dealers' email.	1.0			
ILM ala carte onetime fee	Onetime fee for ILM	1.0	\$899.00	\$300.00	
Data Integration - onetime fee	Onetime fee for data integration with dealer's DMS. Publishes Vehicle Inventory, F&I Deal History and Repair Orders when applicable.	1.0	\$199.00	\$199.00	
Email Banner onetime fee	Creation of Email Banner	1.0			
Email Hosting onetime fee	Email hosting for dealer	1.0			
Inventory Light onetime fee	Onetime fee for limited inventory gallery, view inventory with ILM	1.0			

Products/One Time:	\$499.00
One Time Shipping:	\$0.00
One Time Sales Tax:	\$0.00
Monthly Recurring:	\$499.00
Total Now Due:	\$998.00
Total Monthly Recurring:	\$499.00

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

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

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

Copyright VinSolutions.







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
		/ N N / H H H N	/ 1 N 1 <i>/ /</i> / N 1 1 N / / ·

ONE TIME AUTHORIZATION			
ACCOUNT HOLDE	R INFORMATION		
Account Owners Nar	me:		VinSolutions Account Number: 5826
Address Line 1:			Phone Number:
Address Line 2:			Fax Number:
City:	State:	Zip:	Email:
Opportunity ID: OP#	‡-00222058		Dollar Amount: \$998.00
Credit Card Pa	ayment		
CREDIT CARD INF	FORMATION		
Cardholder Name:			Visa Mastercard AmEx - Please circle one

Check by Fax

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)

ACKNOWLEDGEMENT	
Authorized Name:	Title:
Authorized Signature:	Date: