

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

Sales and Support: 913-825-6124

Invoice For

Nationwide Auto (6477)

Invoice Number:OP#-00278932

Salesperson: Freddy Dubon-Ramirez Date Created: 5/24/2013

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.	g 1.0	\$899.00	\$601.00	
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	
ILM ala carte onetime fee	Onetime fee for ILM	1.0	\$899.00	\$301.00	
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	
Inventory Light onetime fee	Onetime fee for limited inventory gallery, view inventory with ILM	1.0			
Email Banner	Email Banner	1.0			
Launch Coordinator	Launch coordinator ensures smooth transition to MotoSnap.	1.0			

Total Monthly Recurring:	\$700.00
Total Now Due:	\$1,200.00
Monthly Recurring:	\$700.00
One Time Sales Tax:	\$0.00
One Time Shipping:	\$0.00
Products/One Time:	\$500.00

^{*}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

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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.

ONE	TIME	AUTHO	RIZATIO	N

ONE TIMI	E AUTHORIZA	TION	
ACCOUNT HOLDE	ER INFORMATION		
Account Owners Name:			VinSolutions Account Number: 6477
Address Line 1:			Phone Number:
Address Line 2:			Fax Number:
City:	State:	Zip:	Email:
Opportunity ID: OP	#-00278932		Dollar Amount: \$1,200.00
Credit Card P	ayment		
CREDIT CARD IN	FORMATION		
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: