

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

Sales and Support: 913-825-6124

Purchase Agreement Summary For

Tacoma Dodge Chrysler Jeep Ram (4662)

Agreement Number:OP#-00299387 Salesperson: Sarah Nugent Date Created: 9/25/2013

Product	Descri	ption	Qty.	List Price	Sales Price	
Email Templates - Year Long Cam 12)	paign Email Template year long c provides one dealer branded throughout the year. Dealer different variances of core t campaign needs. Must use of	I template to be used is entitled to up to 12 emplate depending on	s 12.0	\$2,748.00	\$2,748.00	
		Products/One One Time Sale	pping:			48.00 \$0.00 \$0.00
		Monthly Recu				\$0.00
		Total Now Du Total Monthl		rring•	\$2,7	48.00 \$0.00
		*Taxes are subject to state ar *Does not include Dealer-pa	nd local regulat	ions and are subjec	t to change	Ψ 0 • 0 •
his invoice does not replace or s	upersede current billing					

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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.

ONE	TIME	AUTHO	RIZATION
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ONE TIME AUTHORIZATION					
ACCOUNT HOLDER IN	FORMATION				
Account Owners Name:			VinSolutions Account Number: 4662		
Address Line 1:			Phone Number:		
Address Line 2:			Fax Number:		
City:	State:	Zip:	Email:		
Opportunity ID: OP#-00299387			Dollar Amount: \$2,748.00		
Credit Card Payment CREDIT CARD INFORMATION					
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)

,	
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: