

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

Sales and Support: 913-825-6124

Purchase Agreement Summary For

Nissan of Muskogee (5928)

Agreement Number:OP#-00297823 Salesperson: Phil Dixon Date Created: 7/30/2013

Products

Product	Description	Qty.	List Price	Sales Price
Website - DIY	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		\$599.00	\$493.45
Inventory Module	Inventory Module - monthly		\$599.00	\$493.45
Black Book Used Car Pricing	Black Book pricing of used cars	1.0	\$99.00	\$81.55
NADA Used Car Pricing Tool	NADA used car pricing tool	1.0	\$99.00	\$81.55
Black Book Used Car Pricing onetime fe Website - DIY onetime fee NADA Used Car Pricing Tool onetime fee Inventory Module onetime fee	e Black Book used car pricing onetime fee Onetime fee to create VIN DIY Website. Onetime fee for NADA used car pricing Onetime fee for Inventory Module	1.0 1.0 1.0	\$99.00 \$599.00 \$99.00 \$599.00	

Total Monthly Recurring:	\$1,150.00
Total Now Due:	\$1,150.00
Monthly Recurring:	\$1,150.00
One Time Sales Tax:	\$0.00
One Time Shipping:	\$0.00
Products/One Time:	\$0.00

^{*}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

Overland Park, KS 66202

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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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ACCOUNT HOLDER	R INFORMATION		
Account Owners Nam	ie:		VinSolutions Account Number: 5928
Address Line 1:			Phone Number:
Address Line 2:			Fax Number:
City:	State:	Zip:	Email:
Opportunity ID: OP#-	00297823		Dollar Amount: \$1,150.00
Credit Card Pa	vment		

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: