

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

Sales and Support: 913-825-6124

Purchase Agreement Summary For

Cole Chrysler Dodge Jeep (5044)

Agreement Number:OP#-00295641 Salesperson: Matt Griffis Date Created: 7/19/2013

Product	Descri	ption	Qty.	List Price	Sales Price	Sales Tax
Post Card 6" X 9"	Post Card 6" X 9" used for a include a website banner, er page (requires VinSolutions tags and posters are extra.	nail template and landing	9818.0	\$4,909.00	\$3,927.20	\$235.63
Postage 1st Class	Postage 1st Class.		9818.0	\$4,418.10	\$3,141.76	\$188.51
Creative/Design time - Postcard	Design charge for custom pe	ostcards. Four hours.	1.0	\$674.00	\$674.00	
Capture Garage Predictor Conquest Record	Capture Garage Predictor C	Capture Garage Predictor Conquest Record. 6776.0 \$677.6		\$677.60	\$271.04	\$16.26
Web site - Banner	Web site Banner for campaigns. 1.0					
Web site - Landing Page	Creation of dealer's landing page for campaign purposes. Does not contain inventory. 1.0					
Email Template	Dealer Branded email template from our library. 1.0					
		Products/One T One Time Shipp One Time Sales Monthly Recurn Monthly Recurn Total Now Due Total Monthly	oing: Tax: ring: ring Sal		\$4	014.00 \$0.00 440.40 \$0.00 \$0.00 454.40 \$0.00
		*Taxes are subject to state and *Does not include Dealer-paid	_	, and the second		
this invoice does not replace or sup	ersede current billing					
☐ Check By Fax	☐ One Time ACH	☐ One Time (G 11. 4	7 1 4 7	1	







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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	AUTHORIZA	ATION		
ACCOUNT HOLDER I	NFORMATION			
Account Owners Name:		<u> </u>	VinSolutions Account Number: 5044	
Address Line 1:			Phone Number:	
Address Line 2:			Fax Number:	
City:	State:	Zip:	Email:	
Opportunity ID: OP#-00)295641		Dollar Amount: \$8,454.40	
aa				
Credit Card Payr	<u>ment</u>			
CREDIT CARD INFOR	MATION			
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: