

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

Sales and Support: 913-825-6124

Purchase Agreement Summary For

Don Gasgarth's Charlotte County Ford (6532)

Agreement Number:OP#-00301070 Salesperson: James Campbell Date Created: 8/28/2013

Products

Product	Description	Qty.	List Price	Sales Price
CRM	Customer Relationship Management System - manages entire customer base. Includes, but not limited to: ILM, spam assassin, bad lead rejection, service marketing, campaign creation, CSR, Wish List, equity mining, reverse look-up, VinBrochures, and free unlimited live online training.		\$1,815.35	\$766.48
CRM Plus Upgrade Package	Upgrade ILM to CRM Plus.	1.0		
Inventory Light	Limited inventory gallery, view inventory with ILM	1.0		
Market Pricing Tool	Local market pricing tool	1.0	\$499.00	\$210.69
Desking Module	Push deals to your DMS, Dealer Track and Route One. Print deals and forms.	1.0	\$483.65	\$204.21
AIS Rebates - Desking Integration	Third party vendor, incentive integration into Desking module.	1.0	\$199.00	\$84.02
Black Book Used Car Pricing	Black Book pricing of used cars	1.0	\$99.00	\$41.80
NADA Used Car Pricing Tool	NADA used car pricing tool	1.0	\$99.00	\$41.80
AIS Rebates - Desking Integration onetime fee	Onetime fee for AIS Rebates - incentive integration into Desking module	1.0	\$199.00	
CRM onetime fee	Customer Relationship Management System - manages entire customer base. Includes, but not limited to: ILM, spam assassin, bad lead rejection, service marketing, campaign creation, CSR, Wish List, equity mining, reverse look-up, VinBrochures, and free unlimited live online training.	1.0	\$1,815.35	
Desking Module onetime fee	Onetime fee for Advanced Desking.	1.0	\$483.65	
Email Banner	Email Banner	1.0	\$199.00	
Form Mapping	Form Mapping. Up to 3 dealership provided forms.	1.0		
Launch Coordinator	Launch coordinator ensures smooth transition to MotoSnap.	1.0		
Trainer - Four Day Package	Four days initial on-site training with one trainer. All travel expenses paid by dealer.	1.0	\$5,399.00	
Trainer - Two Day Install Follow-Up	Two days complimentary install follow-up training with CRM purchase. All travel expenses paid by dealer.	1.0		
Market Pricing Tool onetime fee	Onetime fee for local market pricing	1.0	\$499.00	
Black Book Used Car Pricing onetime fee	Black Book used car pricing onetime fee	1.0	\$99.00	
NADA Used Car Pricing Tool onetime fee	Onetime fee for NADA used car pricing	1.0	\$99.00	

Signature		Date	e	
☐ Check By Fax	☐ One Time ACH	☐ One Time Credit Card Authorization		
*this invoice does not replace o	supersede current billing			
		*Does not include Dealer-paid Travel Expenses related to onsite	training	
		*Taxes are subject to state and local regulations and are subject to change		
		Total Monthly Recurring:	\$1,349.00	
		Total Now Due:	\$1,349.00	
		Monthly Recurring:	\$1,349.00	
		One Time Sales Tax:	\$0.00	
		One Time Shipping:	\$0.00	
		Products/One Time:	\$0.00	

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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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ONE TIME AUTHORIZATION				
ACCOUNT HOLDER	RINFORMATION			
Account Owners Nam	ne:		VinSolutions Account Number: 6532	
Address Line 1:			Phone Number:	
Address Line 2:			Fax Number:	
City:	State:	Zip:	Email:	
Opportunity ID: OP#-	00301070		Dollar Amount: \$1,349.00	
Credit Card Payment				
CREDIT CARD INFO	ORMATION		<u> </u>	
Cardholder Name:			Visa Mastercard AmEx - Please circle one	

Check by Fax

Card Number:

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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: