

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

Sales and Support: 913-825-6124

Invoice For

Beach Boulevard Auto Sales (5904)

Invoice Number:OP#-00223114

Salesperson: Mike Perkins Date Created: 12/19/2012

Products

		Qty.	Price	Sales Price	
ILM Ala Carte interesspar	Internet Lead Management system manages all incomin internet leads. Includes: VinBrochure, reverse look-up, spam assassin and bad lead rejection. Includes mobile application for smart phones.		\$899.00	\$499.00	
Inventory Light Lim	nited inventory gallery, view inventory with ILM	1.0			
Data Integration Inve	a integration with dealer's DMS. Publishes Vehicle entory, F&I Deal History and Repair Orders when dicable.	1.0	\$99.00	\$99.00	
Email Banner Ema	ail Banner	1.0			
Email Hosting Hos	sting of dealers' email.	1.0			
Data Integration - onetime fee Pub	etime fee for data integration with dealer's DMS. blishes Vehicle Inventory, F&I Deal History and bair Orders when applicable.	1.0	\$199.00	\$199.00	
Email Banner onetime fee Crea	eation of Email Banner	1.0			
Email Hosting onetime fee Ema	ail hosting for dealer	1.0			
	Onetime fee for limited inventory gallery, view inventory with ILM				
ILM ala carte onetime fee One	etime fee for ILM	1.0	\$899.00		
Credit - AutoTrader Family Discount One	etime fee AutoTrader Family discount.	1.0		(\$199.00)	

Products/One Time:	\$0.00
One Time Shipping:	\$0.00
One Time Sales Tax:	\$0.00
Monthly Recurring:	\$598.00
Total Now Due:	\$598.00
Total Monthly Recurring:	\$598.00

^{*}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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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	RIZA	TION

ONE TIME	E AUTHORIZA	ATION	
ACCOUNT HOLDE	R INFORMATION		
Account Owners Nar	me:		VinSolutions Account Number: 5904
Address Line 1:			Phone Number:
Address Line 2:			Fax Number:
City:	State:	Zip:	Email:
Opportunity ID: OP#	‡-00223114		Dollar Amount: \$598.00
Credit Card Pa	· ·		
CREDIT CARD INF	ORMATION		
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)

ACKNOWLEDGEMENT	
Authorized Name:	Title:
Authorized Signature:	Date: