

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

Sales and Support: 913-825-6124

Invoice For

Thomson Chrysler Dodge Jeep Ram (5150)

Invoice Number:OP#-00252010 Salesperson: Matt Griffis Date Created: 1/22/2013

Products

Product	Description		List Price	Sales Price	Sales Tax
Data Appending	Recurring appending your customer data.		\$149.00	\$149.00	
Live Phone Calls Ala Carte	In database live phone calls for custom campaign. Onetime setup fee applies.	1000.0	\$2,790.00	\$2,232.00	
Post Card 6" X 9"	Post Card 6" X 9" used for campaigns. Campaigns include a website banner, email template and landing page. Phone calls, hang tags and posters are extra.		\$1,350.00	\$1,080.00	\$86.40
Postage 1st Class	Postage 1st Class.	2700.0	\$1,215.00	\$972.00	\$77.76
Live Phone Calls Ala Carte onetime fee	Onetime setup fee to pull in database customer reports and establish call service.		\$329.00	\$263.20	
Data Appending onetime fee	Onetime fee to initially append customer data.		\$149.00	\$149.00	
Capture Customer Conquest Record	Capture Customer Conquest Record.		\$100.00	\$100.00	
Web site - Banner	Web site Banner for seasonal sales event campaign.	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 Time:	\$4,796.20
One Time Shipping:	\$0.00
One Time Sales Tax:	\$164.16
Monthly Recurring:	\$149.00
Monthly Recurring Sales Tax:	\$0.00
Total Now Due:	\$5,109.36
Total Monthly Recurring:	\$149.00

^{*}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

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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

• T: 1.800.980.7488 • F: 913.825.6396 • www.vinsolutions.com

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 Owners Name:			VinSolutions Account Number: 5150
Address Line 1:			Phone Number:
Address Line 2:			Fax Number:
City:	State:	Zip:	Email:
Opportunity ID: OP#-0025	52010		Dollar Amount: \$5,109.36
Opportunity ID: OP#-0023	52010		Donar Amount: \$3,107.30
Credit Card Paym	ent		

Visa Mastercard AmEx - Please circle one

Check by Fax

Cardholder Name:

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: