

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

Sales and Support: 913-825-6124

Invoice For

# **Airstream Adventures Northwest (4455)**

Invoice Number:OP#-00209289 Salesperson: David Hudson Date Created: 9/14/2012

#### **Products**

Product	Description	Quantity	List Price	Total Price
CRM Upgrade Limited Users	Upgrade ILM to limited user CRM	1.0	\$899.00	\$570.00
Inventory Light	Limited inventory gallery, view inventory with ILM	1.0	\$0.00	\$0.00
Survey Module	Survey Tool for CRM customers	1.0	\$229.00	\$229.00
Service Dashboard	Ties your CRM to your service department dashboard.	1.0	\$0.00	\$0.00
BDC Module	Easily support your entire organization from one centralized location when applicable. Pull any report you want across the entire organization, ROI, lead performance, anything.	1.0	\$0.00	\$0.00
Desking Light	Enables payment calculator and summary.	1.0	\$0.00	\$0.00
Dynamic Comment Builder	Dynamic comment builder automatically creates rich vehicle descriptions with no two alike.	1.0	\$0.00	\$0.00
Email Banner	Email Banner	1.0	\$0.00	\$0.00
Email Hosting	Hosting of dealers' email.	1.0	\$0.00	\$0.00
Form Mapping	Form Mapping. Up to 3 dealership provided forms.	1.0	\$0.00	\$0.00
Mobile Application	Smart phone application	1.0	\$0.00	\$0.00
CRM Limited User Upgrade onetime fee	Upgrade ILM to limited user CRM onetime fee, includes 3 days of training with 1 trainer, expenses paid by dealer	1.0	\$5,199.00	\$5,199.00
Survey Module onetime fee	Onetime fee for Survey Tool for CRM customers	1.0	\$229.00	\$229.00
Service Dashboard onetime fee	-	1.0	\$0.00	\$0.00
BDC Module onetime fee	Create BDC module	1.0	\$0.00	\$0.00
Desking Light onetime fee	Setup payment calculator and summary.	1.0	\$0.00	\$0.00

Dynamic comment builder onetime fee	Setup dynamic comment builde	1.0	\$0.00	\$0.00	
Email Banner onetime fee	Creation of Email Banner	1.0	\$0.00	\$0.00	
Email Hosting onetime fee	Email hosting for dealer		1.0	\$0.00	\$0.00
Form Mapping Onetime fee	Form Mapping. Up to 3 dealers provided forms.	hip	1.0	\$0.00	\$0.00
Inventory Light onetime fee	Onetime fee for limited inventor gallery, view inventory with IL		1.0	\$0.00	\$0.00
Mobile Application onetime fee	Smart phone application		1.0	\$0.00	\$0.00
Trainer - Three Day Package	Three days on-site with one trainer. All travel expenses paid by dealer. Package is discounted 10%.		1.0	\$0.00	\$0.00
Launch Coordinator	Launch coordinator ensures smooth transition to MotoSnap.		1.0	\$0.00	\$0.00
Credit - AutoTrader Family Discount	Onetime fee AutoTrader Family discount.		1.0	\$0.00	(\$630.00)
Trainer - 1 Day Credit	Credit of one trainer day		2.0	(\$2,798.00) (	(\$2,798.00)
*this invoice does not replace or supersede current billing				Products/One Time: Monthly Recurring: One Time Shipping:	
			Total 2	Due Now:	\$2,799.00
☐ Check By Fax ☐	One Time ACH	One Tim	e Credit Ca	rd Authorizati	on
Signature				Date	

Copyright VinSolutions.







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.

ONE	TIME	AUTHO	RIZATION
		/ <b>N N</b> / <b>H H H N</b>	/ 1 N 1 <i>/ /</i> / N 1 1 N / / ·

ONE TIME AUTHORIZATION			
ACCOUNT HOLDER IN	FORMATION		
Account Owners Name:			VinSolutions Account Number: 4455
Address Line 1:			Phone Number:
Address Line 2:			Fax Number:
City:	State:	Zip:	Email:
Opportunity ID: OP#-002	09289		Dollar Amount: \$2,799.00
Credit Card Paym			
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: