

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

Sales and Support: 913-825-6124

Purchase Agreement Summary For

Mountain View Ford Lincoln (5849)

Agreement Number: OP#-00293586 Salesperson: Jason Gorman Date Created: 7/25/2013

Products

Product	Description		List Price	Sales Price	Sales Tax
Postage 1st Class	Postage 1st Class.	10800.0	\$4,860.00	\$4,860.00	\$449.55
Post Card 6" X 9"	Post Card 6" X 9" used for campaigns. Campaigns include a website banner, email template and landing page (requires VinSolutions' website). Phone calls, hang tags and posters are extra.	10800.0	\$5,400.00	\$4,320.00	\$399.60
Capture Garage Predictor Conquest Record	Capture Garage Predictor Conquest Record.	6500.0	\$650.00	\$650.00	
Posters 11" X 17" (5)	Dealership Posters 11"X17" four color, 100 lb. stock, glossy UV coating. Quantity of 5, includes postage.	1.0	\$149.00	\$149.00	\$13.78
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			

Total Monthly Recurring:	\$0.00
Total Now Due:	\$10,841.93
Monthly Recurring Sales Tax:	\$0.00
Monthly Recurring:	\$0.00
One Time Sales Tax:	\$862.93
One Time Shipping:	\$0.00
Products/One Time:	\$9,979.00

		*Does not include Dealer-paid Travel Expenses related to onsite training
this invoice does not replace or	supersede current billing	
☐ Check By Fax	☐ One Time ACH	☐ One Time Credit Card Authorization
Signature		Date

^{*}Taxes are subject to state and local regulations and are subject to change

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	TIN	AE A	TU A	Γ HO	RIZA	TION

ACCOUNT HOLDER INF	ORMATION			
Account Owners Name:			VinSolutions Account Number: 5849 Phone Number:	
Address Line 1:				
Address Line 2:			Fax Number:	
City:	State:	Zip:	Email:	
Opportunity ID: OP#-00293586			Dollar Amount: \$10,841.93	
Cardholder Name:			Visa Mastercard AmEx - Please circle one	
Card Number:			Expiration Date:	
Check by Fax				
CHECK BY FAX INFORM	AATION (ACTUAL C	THECV		
	IS EORM) DO NOT N			
MUST ACCOMPANY TH	IS FORM) DO NOT N	/IAIL	Bank Phone:	
MUST ACCOMPANY TH Bank Name: Name on Bank Acct:	IS FORM) DO NOT N	/IAIL	Bank Phone: Check Number:	

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: