

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

Sales and Support: 913-825-6124

Invoice For

Loeber Motors (6468)

Invoice Number: OP#-00278003

Salesperson: Erick Dubon Date Created: 5/20/2013

Products

| Product | Description | Qty. | List Price | Sales Price | |
|---|--|------|---------------|----------------|--|
| ILM Ala Carte | Internet Lead Management system manages all incoming internet leads. Includes: VinBrochure, reverse look-up, spam assassin and bad lead rejection. Includes mobile application for smart phones. | 1.0 | \$899.00 | \$600.00 | |
| Inventory Light | Limited inventory gallery, view inventory with ILM | 1.0 | | | |
| Data Integration | Data integration with dealer's DMS. Publishes Vehicle Inventory, F&I Deal History and Repair Orders when applicable. | 1.0 | \$99.00 | \$99.00 | |
| Customer Text Messaging - 1000 Texts | Customer Text Messaging - 1000 texts per month incoming or outgoing. In the case of overages, dealer will be invoiced for and moved to the ongoing quantity that covers usage. Unused texts are not rolled over. | 1.0 | \$29.00 | | |
| Email Banner | Email Banner | 1.0 | | | |
| ILM ala carte onetime fee | Onetime fee for ILM | 1.0 | \$899.00 | \$750.00 | |
| Data Integration - onetime fee | Onetime fee for data integration with dealer's DMS. Publishes Vehicle Inventory, F&I Deal History and Repair Orders when applicable. | 1.0 | \$199.00 | \$199.00 | |
| Customer Text Messaging - 1000 Texts Onetime Fee | Customer Text Messaging onetime fee. | 1.0 | \$49.00 | | |
| Email Banner onetime fee | Creation of Email Banner | 1.0 | | | |
| Launch Coordinator | Launch coordinator ensures smooth transition to MotoSnap. | 1.0 | | | |
| Inventory Light onetime fee | Onetime fee for limited inventory gallery, view inventory with ILM | 1.0 | | | |
| | | | | | |

| Total Monthly Recurring: | \$699.00 |
|---------------------------------|------------|
| Total Now Due: | \$1,648.00 |
| Monthly Recurring: | \$699.00 |
| One Time Sales Tax: | \$0.00 |
| One Time Shipping: | \$0.00 |
| Products/One Time: | \$949.00 |

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

^{*}Does not include Dealer-paid Travel Expenses related to onsite training

| ☐ Check By Fax | ☐ One Time ACH | ☐ One Time Credit Card | Authorization |
|----------------|----------------|------------------------|---------------|
| Signature | | | Date |
| | | | |

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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 |)RIZAT | LIUN |
|-----|------|-------|--------|------|
| | | | | |

| Account Owners Name | : | | VinSolutions Account Number: 6468 |
|-----------------------|---------|------|-----------------------------------|
| Address Line 1: | | | Phone Number: |
| Address Line 2: | | | Fax Number: |
| City: | State: | Zip: | Email: |
| Opportunity ID: OP#-0 | 0278003 | - | Dollar Amount: \$1,648.00 |

Credit Card Payment

| CREDIT CARD INFORMATION | |
|-------------------------|--|
| Cardholder Name: | Visa Mastercard AmEx - Please circle one |
| Card Number: | Expiration Date: |

Check by Fax

| 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: | |

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: |