## www.StreamCompanies.com

## Vertex Standard Tri-fold Brochure Order Form

*Dealership Name	
Contact Name	Vertex Standard #
*Website	Email Address
*Address	
*City	*State
	Fax
□ Check if <b>email address</b> should print on tri-fo □ Please include my company logo on mailer. <b>(F</b>	old. Please email your logo to tiffanie@streamcompanies.co
Choose Your Vertex Standard Tri-fold Bro Tri-fold flat size: 8.5 x 11	ochure: 🗆 eVerge
INDICATE OFFER TO APPEAR (optional):	
Please check quantity next to tri-fold pric	
Trifold Turnkey Prices (check one)	
300\$950	-
□ 500 <b>\$1200</b> □ 2,000 <b>\$242</b>	
□ 750 <b>\$1400</b> □ 2,500 <b>\$283</b>	<b>35</b> □ 750 <b>\$847</b> □ 2,500 <b>\$1360</b>
□ 1,000 <b>\$1600</b> □ 3,000 <b>\$325</b>	<b>50</b> □ 1,000 <b>\$925</b> 3,000 <b>\$1520</b>
	is currently not shown on the template, a charge of \$25 will be any questions. * Additional shipping fee will be applied for blank al address, shipments can not be made to a PO Box.
List Services (complete only if you wish Stream to s	upply a prospect list for your mailing) Stream Companies uses the
finest publications lists in the industry to target the exact us Counties you wish to mail to: (please attach a sheet if mo	sers of Vertex Standard products.
Guillies you wish to man to. (please attach a sheet if mo	List must les.
Agreement	
I agree to follow the guidelines set forth in the Vertex program must be pre-approved for reimbursement. A	Standard co-op program. I understand that the above direct ma After completing the mailer your dealership will be reimbursed cation is sent. Stream Companies' payment terms are net 30.
Authorized Signature:	Order Total \$ Date:
	to (610) 540-6433, Attn: Tiffanie Leos
☐ Deduct Funds from My Co-op Acco	ount 🗆 Bill My Dealership Directly

\* Please remember to send over your Vendor Co-op Release Form and we will submit to Brand Muscle.



www.streamwirelesscoop.com 400 Lapp Road Malvern, PA 19355

**FAX THIS ORDER TO:** [Fax] **610-540-6433** 

## **Your Account Executive:**



Tiffanie Leos
Vertex Standard Co-op Manager
[Voice] 610.644.8637 x247
tiffanie@StreamCompanies.com

Call me TODAY and ask about co-op for Vertex Standard

REV 7/15/14



## **Direct Deduct Co-op Release Authorization Form**

Use this form to approve the release of co-op funds directly to the vendor listed below. The standard Prior Approval and Claim forms should be used for all other authorizations. This authorization is not transferable, and is valid only for the below described activity.

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Vendor Instructions:	For TradeOne Use Only:		
Step 1: Complete form and obtain signature from authorized dealer representative  Step 2: Submit a prior approval request to TradeOne – include a copy of this form along with the proposed activity description and sample – make changes if requested. Fax to 512-427-0452  Step 3: If approved, complete marketing activity for dealer  Step 4: Submit invoice with all required paperwork to TradeOne	Reviewed by:  Activity Approved: Yes No  Required Changes:  Approval No: Percent Approved: %  Funds Reserved: Yes No  Amount: \$  Billable to: c/o TradeOne Dealer Only		
Dealership Name:			
Vertex Standard Dealership Number:(should be 5 digits)			
Authorized Dealer Rep:(print name here, sign below)			
co-op funds, please fill out the following information. P	ole at the time of this request, TradeOne will reserve the below		
Supplier/Vendor Name:	dor Name:Contact:		
Marketing Activity Description:Phone#:			
Maximum Co-op Deduction Authorized: \$(subject to available funds			
of performance documents and compliance with the	Marketing will review all submissions for the required proof ne current co-op guidelines. Activities failing to adhere to payment of funds is not allowed. Reimbursement will eviewed for compliance.		
Terms Acceptance Agreements:			
A. Vertex Standard reserves the right to void any claims that do not comply with the terms and condition of the co-op program policy			

- B. Prior approval is required for all activities unless expressly stated otherwise by Vertex Standard
- C. Dealer authorizes TradeOne Marketing to release dealer co-op account balance information to vendor selected above
- D. Dealer agrees to pay any outstanding balance owed to vendor due to insufficient available co-op funds. Pending payments to vendors against co-op funds not yet earned will not be allowed

Dealership Authorized Signature:		_Title:
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