

Logo Design

► Order Form

Dealership Name _____

Contact Name _____ Motorola# _____

Website _____ Email Address _____

Address _____

City _____ State _____ Zip _____

Telephone _____ Fax _____

► Logo design instructions:

The initial proof will contain 3 logos to choose from. After that, two rounds of changes are permitted.

Color Scheme: Please indicate color preferences:

► Cost: (please note: your logo design will not be able to have co-op dollars applied)

One logo design = **\$1,250**

► Agreement

I agree to follow the guidelines. Stream Companies' payment terms are net 30.

Authorized Signature: _____

Order Total \$ _____ Date: _____

Please fax completed form to (610) 540-6433, Attn: Heidi Adams or Tiffanie Leos

stream
c o m p a n i e s

www.StreamCompanies.com
255 Great Valley Parkway, Suite 150
Malvern, PA 19355

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

**Please check off
your account executive:**



Heidi Adams
Senior Account Executive

[Voice] **610.644.8637 x234**
heidi@StreamCompanies.com



Tiffanie Leos
Account Executive

[Voice] **610.644.8637 x247**
tiffanie@StreamCompanies.com

**Call me TODAY and ask about
co-op for Motorola**

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On Hold Message
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Brochures
Sell Sheets
Logo Design
Advertising
Marketing
Web Design

REV 2/25/09

www.StreamCompanies.com



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.)

Vendor Instructions:

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.

For TradeOne Use Only:

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 _____

Motorola Dealership Number _____ (should be 10 digits)

Authorizing Dealer Representative _____ (print name here, signature below)

Vendor/Activity Information:

In order for TradeOne Marketing to be authorized to reserve funds and dispense payment from your Motorola co-op fund, please fill out the following information. Please specify the maximum amount of funds you are authorizing for this order.

Supplier/Vendor Name _____ Contact: _____

Marketing Activity Description _____ Phone # _____

Maximum Co-op Deduction Authorized \$ _____ (subject to available funds)

(Prior to releasing any co-op payments, TradeOne Marketing will review all submissions for the required proof of performance documents and compliance with the terms of the current co-op program guidelines. Payment will be made only on marketing activities that are in compliance with the current co-op guidelines. Activities failing to adhere to these terms will not be approved for payment. Pre-payment of funds is not allowed. Reimbursement will only be made once the activity is completed and reviewed for compliance.)

Terms Acceptance Agreements:

- A. Motorola reserves the right to void any claims that do not comply with the terms and conditions of the co-op program policy
- B. **Prior approval is required for all activities** unless expressly stated otherwise by Motorola
- 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 coop funds not yet earned will not be allowed.**

Dealership Authorized

Signature _____ Title _____