

Motorola Semi-Custom Email Newsletter



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

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

▶ Order Form (items marked with "*" will print on email)

*Dealership Name _____
Contact Name _____ Motorola# _____
*Website _____ Email Address _____
*Address _____
*City _____ *State _____ *Zip _____
*Telephone _____ Fax _____
Sender Email Address _____
(This email address will show up as the sender address in the heading of the email)

▶ Email Blast Price

Please check quantity of the email blast

- 4 Emails = \$2,746 Please determine the dates you would like your email sent. Please Note: the first date can be no sooner than 10 business days after receiving your order form, personal text and image request. We will also be needing your email address 4 business days prior to blast date. This also includes adding additional addresses throughout the blast dates.
- 8 Emails = \$3,342
- 12 Emails = \$4,888

Blast Dates must be at least 14 days apart.

1st Blast Date: _____	7th Blast Date: _____
2nd Blast Date: _____	8th Blast Date: _____
3rd Blast Date: _____	9th Blast Date: _____
4th Blast Date: _____	10th Blast Date: _____
5th Blast Date: _____	11th Blast Date: _____
6th Blast Date: _____	12th Blast Date: _____

▶ Instructions

Your email addresses need to be emailed to Chrissy@streamcompanies.com and CC Tiffanie@streamcompanies.com. Proper format is that the email addresses are in a Microsoft Excel file. If you have first and last names of your email contacts, the first and last name will need to be in separate columns in the excel file. For example, column A - John, column B - Smith, column C - johnsmith@abccom.com.

Dealer will need to supply Stream with a product image (ex. CP200) and a few sentences of text about the product. This information will be needed by 7 business days prior to each blast date. Or you can supply all the images and text for each upfront. All products and text must be Motorola and approved by Motorola Co-op.

Color Scheme: Stream will determine color scheme to match your logo. If you do not have a logo, or if your logo is just one color, please indicate which two colors you would like in your template here:
_____ (only list colors if you don't have a logo, or if your logo is only 1 color)

▶ Agreement

I agree to follow the guidelines set forth in the Motorola co-op program. I understand that the above program must be pre-approved for reimbursement. After completing the mailer your dealership will be reimbursed through Motorola, once appropriate documentation is sent. Stream Companies' payment terms are net 30.

Authorized Signature: _____ Order Total \$ _____ Date: _____

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

- Deduct Funds from My Co-op Account Bill My Dealership Directly

* Please remember to send over your Vendor Co-op Release Form and we will submit to Trade One.

Your Account Executive:



Tiffanie Leos
Account Executive

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

Call me TODAY
and ask about

co-op for
Motorola

Brochures
Pocket Folders
Sell Sheets
Logo Design
Advertising
Marketing
Printing
Web Design



REV 2/12/10



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 _____