

SDADA SERVICES, INC.

SHIPPING: 3801 S. Kiwanis Ave. • Sioux Falls, SD 57105
 MAILING: PO Box 89008 • Sioux Falls, SD 57109-9008
 PHONE: 605-336-2616 • FAX: 605-334-1938
 EMAIL: info@sdautodealer.com • WEBSITE: www.sdautodealer.com

ORDER FORM

| ITEM | PRICE | Members | Non-Members | QUANTITY |
|--|--|---|---|---|
| D - PLATES <i>(Please circle which one)</i> | D # _____ 100 200 300 400 500 1000 | \$17.00 \$26.00 \$34.00 \$41.00 \$45.00 \$72.00 | (\$20.40) (\$31.20) (\$40.80) (\$49.20) (\$54.00) (\$86.40) | |
| Sold - White Demonstration - Blue *New Setup Fee: \$10.00 each | | | | |
| "OTHER" D- PLATES <i>(Boat, Motorcycle, Snowmobile, Trailer)</i> <i>(Please circle which one)</i> | Please indicate: D#, MCD#, B#, TD# or SMD# _____ # _____ 50 100 200 500 1000 | \$20.00 \$27.00 \$33.00 \$62.00 \$102.00 | (\$24.00) (\$32.40) (\$39.60) (\$74.40) (\$122.40) | |
| Sold - White Demonstration - Blue *New Setup Fee: \$10.00 each | | | | |
| PURCHASE ORDERS (100 per package) | 100 200 300 400 500 1000 | \$28.00 \$54.00 \$78.00 \$100.00 \$120.00 \$230.00 | (\$33.60) (\$64.80) (\$93.60) (\$120.00) (\$144.00) (\$276.00) | Circle: 1/14 or 10/14 |
| BUYERS GUIDES (BG-3) (2-part) (100 per package) | 100 200 300 400 500 1000 | \$28.00 \$54.00 \$78.00 \$100.00 \$120.00 \$230.00 | (\$33.60) (\$64.80) (\$93.60) (\$120.00) (\$144.00) (\$276.00) | |
| SD SECURE ODOMETER DISCLOSURE STATEMENTS (100 per package) | 100 200 300 400 500 1000 | \$28.00 \$54.00 \$78.00 \$100.00 \$120.00 \$230.00 | (\$33.60) (\$64.80) (\$93.60) (\$120.00) (\$144.00) (\$276.00) | |
| ODOMETER REPAIR STICKERS (Sheet of 10) | | \$8.50 | (\$10.00) | |
| DAMAGE/SALVAGE NOTICE (DSN-1) | 25 (1pkg) | \$8.75 | (\$10.50) | |
| SECURE POWER OF ATTORNEY FORMS (POA-3) | 25 (1pkg) | \$17.00 | (\$20.00) | |
| SECURE DEALER REASSIGNMENT FORMS (SRA-3) | 25 (1pkg) | \$17.00 | (\$20.00) | |
| CONSIGNMENT SALES CONTRACTS (CON-1) | | \$1.00 | (\$1.50) | |
| DEAL JACKETS Buff / Blue | 125 250 500 1,000 | \$50.00 \$82.50 \$155.00 \$290.00 | (\$60.00) (\$99.00) (\$186.00) (\$348.00) | |
| PADDED FORMS: <i>Padded in 50's</i> Receipt for Delivery of Title/Excise Tax Notice (RDT-1) Agreement to Provide Insurance (API-1) Personal Info Release Form (2-part carbonless) (PRF-1) Generic We Owe Forms (3-part carbonless) (5-1/2x8-1/2) (Imprinted Available – Call For Prices) | 50 50 50 50 | \$8.00 \$8.00 \$11.00 \$11.00 | (\$9.60) (\$9.60) (\$13.20) (\$13.20) | |
| FLOURESCENT MIRROR HANG TAGS (Blank) Red / Green / Yellow / Pink / White | 50 | \$22.50 | (\$27.00) | Circle: Black Border / No Border |

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|--|-------|----------|-------------|----------|
| KEY TAGS | | | | |
| Versa Tags (fold-over) | 250 | \$45.00 | (\$54.00) | |
| Yellow / Blue / Red / White / Green | 500 | \$71.00 | (\$85.20) | |
| Orange / Gray / Tan / Lilac | 1000 | \$127.00 | (\$152.40) | |
| Poly Tags (plastic) | | | | |
| White / Yellow | 250 | \$27.00 | (\$32.40) | |
| | 500 | \$51.00 | (\$61.20) | |
| | 1000 | \$91.00 | (\$109.20) | |
| Arrow ID Tags | | | | |
| White / Yellow / Red / Green / Orange / Blue | 500 | \$18.25 | (\$21.90) | |
| | 1000 | \$31.00 | (\$37.20) | |
| WINDOW STICKERS | | | | |
| Versa Tag Kleer-Bak (1983) | 100 | \$14.25 | (\$17.10) | |
| Red / Blue / Yellow / White / Green / Orange | | | | |

BANK CONTRACT ORDER INFORMATION

LAW 553-SD/ARB (BANK CONTRACTS) - Reynolds & Reynolds
RETAIL INSTALLMENT CONTRACTS - Reynolds & Reynolds
To Order Call: Caden Grebin
314-399-6259 or 800-654-6768 / Fax: 866-823-7747

SPECIAL NOTE: Prices are subject to change without notice and **do not** include shipping & handling or sales tax. Those prices in parenthesis (0.00) are SDADA non-member prices.

Please allow up to 10 working days to receive your order.

RETURN POLICY:

1. No returns on any package that has been opened.
2. There is a restocking fee of 15% on anything that is returned within 90 days.
3. No returns accepted on forms purchased over 90 days.
4. No returns on forms that are obsolete.

SHIP TO:

ORDERED BY: _____ DATE: _____

DEALERSHIP: _____ PHONE: _____

MAILING ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PLEASE CHARGE THIS CREDIT CARD: Discover MasterCard Visa American Express

CARD NUMBER: _____ EXPIRATION DATE: _____ CVV# _____

PRINTED NAME OF CARD HOLDER: _____ SIGNATURE OF CARD HOLDER: _____