

INSERTION ORDER

PURCHASER NAME			
PURCHASER MAIN CONTACT		SPDS MAIN CONTACT	
PHONE NUMBER		PHONE NUMBER	(989) 747-8300
FAX NUMBER		FAX NUMBER	(989) 747-8300
E-MAIL ADDRESS		E-MAIL ADDRESS	
PURCHASER BUSINESS ADDRESS		SPDS ACCOUNTS PAYABLE ADDRESS	P.O. BOX 180608 Utica, MI 48317
LEAD TYPE			
MONTHLY CAP			
TRANSFER NUMBERS		PRE-PAYMENT	
PRICE			
CAMPAIGN SPECIFICS			
	INCENTIVIZED: NO	EXCLUSIVE: YES	[
CAMPAIGN NOTES			
CREDIT CARD INFO			
CREDIT CARD NO.		EXP. DATE	
SECURITY CODE		BILLING ZIP CODE	
NAME ON CARD		CARD TYPE	
ACCOUNTS PAYABLE INF	-0		
ACCOUNTS PAYABLE NAME		ACCOUNTS PAYABLE PHONE NUMBER	
ACCOUNTS PAYABLE E-MAIL ADDRESS			

This Insertion Order incorporates the terms and conditions set forth in the Sub-Prime Dealer Services and Call Transfer Sales Agreement between the Parties dated as ______(date).

SUB-PRIME DEALER SERVICES	PURCHASER
Ву:	Ву:
Print Name:	Print Name:
Title:	Title: