

Mail To :
 Vemeco, Inc.
 P.O. Box 398
 Dublin, Ohio 43017



Pre-Owned Vehicle Service Contract
 Protection Plan

Sales Register

Seller					Date		
Address				Seller Account #			
City				State		Zip	
Prepared By			Period Ending		Page of		

No.	Date Sold	Contract Holder	Cancel	Coverage Level	Coverage Cost	Surcharges	Total Due
1			\$		\$	\$	\$
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							
16							
17							
18							
19							
20							

Attach Check(s), Cancellation(s), and Application(s) to Sales Register Make Checks Payable To: Vemeco, Inc. P.O. Box 398 Dublin, Ohio 43017	TOTALS	\$		\$	\$	\$
	Overnight Deliveries Only :			Written Contracts (Coverage Cost + Surcharges)		\$
	Attn: Vemeco, Inc.			Less Cancels		\$
	5200 Upper Metro Place Suite 350 Dublin, Ohio 43017			Net Due		\$
Check #						