



# CERTIFIED WARRANTY REGISTER

Sales for Month:		Agency Code #:		Agency Name:	
Dealer Name:		Dealer Code #:		Dealer Contact:	
Address:					
Telephone #:		E-mail:			

Warranty Number	Suffix	VSC Upsell Contract Number	Suffix	Owner's Name	VSC/Warranty Price	Options + Surcharges =		Dealer Remittance
						Type	\$	
123456789	VLW	9876543210	VQ	John Smith	455			455
123456790	VLW			Rex Jones	139			139 DO NOT ADD
1.								
2.								
3.								
4.								
5.								
6.								
7.								
8.								
9.								
10.								
11.								
12.								
13.								
14.								
15.								
<b>Total Remittance: \$</b>								

**IMPORTANT:**

Enclose Dealer Check with Register(s),  
MAKE CHECK PAYABLE TO: INTERSTATE

Interstate National Dealer Services, Inc.  
6120 Powers Ferry Rd. NW, Suite 200  
Atlanta, GA 30339  
800-942-0400 www.inds.com