

VinSolutions 6405 Metcalf Ave Suite 400 Overland Park, KS 66202 www.vinsolutions.com

Sales and Support: 913-825-6124

Purchase Agreement Summary For

## New City Nissan (6513)

Agreement Number:OP#-00288338 Salesperson: Anthony McGinnis Date Created: 6/25/2013

Products						
Product	Descri	ption	Qty.	List Price	Sales Price	
VinCamera & Software	G700		1.0	\$799.00	\$799.00	
		Products/One 7	ime:		\$7	799.00
		One Time Ship	ping:			\$0.00
		One Time Sale	s Tax:			\$0.00
		Monthly Recurring:			\$0.00	
		<b>Total Now Du</b>	e <b>:</b>		\$7	799.00
		<b>Total Monthly</b>	Recu	rring:		\$0.00
		*Taxes are subject to state and	local regula	tions and are subject	to change	
		*Does not include Dealer-paid	Travel Expe	enses related to onsit	e training	
*this invoice does not replace or	supersede current billing					
☐ Check By Fax	☐ One Time ACH	☐ One Time	Credit	Card Autl	horization	1
Signature				Da	te	

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VinSolutions 6405 Metcalf Ave Suite 400 Overland Park, KS 66202 (P) 913-825-6300 (F) 617-904-1618

## **Payment Authorization**

The undersigned customer hereby authorizes VinSolutions, LLC to charge said account on our behalf. If selecting the Check by Fax option, we authorize VinSolutions to submit all pertinent information from this check to our bank for payment as check, and we understand that we are not required to submit the check to VinSolutions.

ONE	TIME	AUTHO	RIZA	TION

ONE TIME AUTHORIZATION				
ATION				
Account Owners Name:		VinSolutions Account Number: 6513		
Address Line 1:		Phone Number:		
Address Line 2:		Fax Number:		
State:	Zip:	Email:		
		Dollar Amount: \$799.00		
ī				
		Visa Mastercard AmEx - Please circle one		
	ATION	ATION  State: Zip:		

## **Check by Fax**

Card Number:

•				
CHECK BY FAX INFORMATION (ACTUAL CHECK				
MUST ACCOMPANY THIS FORM) DO NOT MAIL				
Bank Name:	Bank Phone:			
Name on Bank Acct:	Check Number:			
Bank Routing Number:	Checking Account Number:			

Expiration Date:

## **ACH (Electronic Debit)**

`	
ACH (ELECTRONIC DEBIT) (VOIDED CHECK MUST	
ACCOMPANY THIS FORM)	
Bank Name:	Bank Phone:
Name on Bank Acct:	
Bank Routing Number:	
Checking Account Number:	

ACKNOWLEDGEMENT	
Authorized Name:	Title:
Authorized Signature:	Date: