

VinSolutions 6405 Metcalf Ave Suite 400 Overland Park, KS 66202 www.vinsolutions.com Sales and Support: 913-825-6124

Invoice For

Duval Mazda at The Avenues (4180)

Invoice Number:OP#-00222184 Salesperson: Keith Kirby Date Created: 10/22/2012

Products

Product	Description		Qty.	List Price	Sales Price	Sales Tax
Website - Design Upgrade Credit - AutoTrader Family Discount	Change web site to different look a Onetime fee AutoTrader Family dis		1.0	\$799.00 \$0.00	\$799.00 (\$200.00)	\$55.93 \$0.00
*this invoice does not replace or supe		Products/Or Monthly Re One Time S Sales Tax:	currin	g:		\$599.00 \$0.00 \$0.00 \$55.93
☐ Check By Fax	□ One Time ACH	Total Now I		Card Autl	horizatio	\$654.93
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.

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ONE HIME	E AUTHORIZA	ATION			
ACCOUNT HOLDE					
Account Owners Name:			VinSolutions Account Number: 4180 Phone Number:		
Address Line 1:					
Address Line 2:			Fax Number:		
City:	State:	Zip:	Email:		
Opportunity ID: OP#-00222184			Dollar Amount: \$599.00		
Credit Card Pa	·				
	·				
	·		Visa Mastercard AmEx - Please circle one		
CREDIT CARD INF	·		Visa Mastercard AmEx - Please circle one Expiration Date:		
CREDIT CARD INF Cardholder Name: Card Number: Check by Fax CHECK BY FAX IN	ORMATION FORMATION (ACTUAL C				
CREDIT CARD INF Cardholder Name: Card Number: Check by Fax CHECK BY FAX IN MUST ACCOMPAN	ORMATION		Expiration Date:		
CREDIT CARD INF Cardholder Name: Card Number: Check by Fax CHECK BY FAX IN	ORMATION FORMATION (ACTUAL C				

ACH (Electronic Debit)

Bank Routing Number:

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

Checking Account Number:

ACKNOWLEDGEMENT	
Authorized Name:	Title:
Authorized Signature:	Date: