

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

Invoice For

# **Drive With Pride (5194)**

Invoice Number:OP#-00195496 Salesperson: David White Date Created: 5/30/2012

#### **Products**

Product	Description		Quantity	Total Price
Call Tracking - Unlimited	1 1	rebsite with up to 50 r call tracking and	1.0	\$549.00
Call Tracking - Unlimited onetime fee	Call Tracking - U	nlimited onetime fee.	1.0	\$549.00
			Total Di	Total: \$1,098.00 Shipping: \$0.00 Invoice Total ae NOW: \$1,098.00
☐ Check By Fax	☐ One Time ACH	☐ One Time (	Credit Card Au	uthorization
Signature			Г	Date

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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	RIZATIO	N

<b>ONE TIMI</b>	E AUTHORIZA	TION	
ACCOUNT HOLDE	R INFORMATION		
Account Owners Na	me:		VinSolutions Account Number: 5194
Address Line 1:			Phone Number:
Address Line 2:			Fax Number:
City:	State:	Zip:	Email:
Opportunity ID: OP#	<del>+</del> -00195496		Dollar Amount: \$1,098.00
Credit Card Pa	•		
Cardholder Name:			Visa Mastercard AmEx - Please circle one
Card Number:			Expiration Date:

### Check by Fax

•	
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:

### **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: