

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

Invoice For

Arapahoe KIA (4209)

Invoice Number:OP#-00207580 Salesperson: Phil Dixon Jr Date Created: 7/3/2012

Products

Product	Description		Quantity	Total Price
Training Manuals	Training manuals to be shipped to dealer.		1.0	\$6.99
			Products/One Tin Monthly Recurri One Time Shippi	ing: \$0.00
			Total Due No	w: \$7.29
☐ Check By Fax	☐ One Time ACH	☐ One Time C	redit Card Authoriza	ation
Signature			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.

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ACCOUNT HOLDER INFORMATION			
Account Owners Name:		VinSolutions Account Number: 4209	
Address Line 1:		Phone Number:	
Address Line 2:		Fax Number:	
City: State:	Zip:	Email:	
Opportunity ID: OP#-00207580		Dollar Amount: \$7.29	
- · · · ·	Zip:		

Credit Card Payment

CREDIT CARD INFORMATION	
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: