

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

Sales and Support: 913-825-6124

Purchase Agreement Summary For

## Paramount Auto of Hickory (4681)

Agreement Number:OP#-00292353 Salesperson: Matt Griffis Date Created: 7/3/2013

Product	Description		Qty.	List Price	Sales Price	Sales Tax
inSticker - REORDER 1000 Custon	Reorder custom four color V price per 1000	Vinstickers window sticker	1.0	\$899.00	\$899.00	\$62.93
		Products/One 7	Time:		\$8	899.00
		One Time Ship				\$0.00
		One Time Sale			S	\$62.93
		Monthly Recur	_	1 T		\$0.00
		Monthly Recur <b>Total Now Du</b>		nes rax:	\$(	\$0.00 <b>961.93</b>
		Total Monthly		ring:	φ:	\$0.00
						,
		*Taxes are subject to state and  *Does not include Dealer-paid	_			
his invoice does not replace or sup	ersede current hilling					

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Signature





Date

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

<b>ONE TIME</b>	<b>AUTHORIZA</b>	TION		
ACCOUNT HOLDER	INFORMATION			
Account Owners Name:			VinSolutions Account Number: 4681	
Address Line 1:			Phone Number:	
Address Line 2:			Fax Number:	
City:	State:	Zip:	Email:	
Opportunity ID: OP#-0	00292353		Dollar Amount: \$961.93	
Credit Card Pay				
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: