

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

Invoice For

# **Dugan Chevrolet (4829)**

Invoice Number:OP#-00222657 Salesperson: Darin Mayville Date Created: 10/29/2012

### **Products**

Product	Description		Qty.	List Price	Sales Price	Sales Tax
Custom Form Design	Design of custom forms		1.0	\$199.00	\$199.00	\$13.93
*this invoice does not replace or sup	ersede current billing	Products/One Monthly Rec One Time Sh Sales Tax:	currin	g:		\$199.00 \$0.00 \$0.00 \$13.93
☐ Check By Fax	□ One Time ACH	<b>Total Now I</b> ☐ One Time O		Card Aut	horizatio	\$212.93
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.

ONE	TIME	AUTHO	RIZATION
		/ <b>N N</b> / <b>H H H N</b>	/ 1 N 1 <i>/ /</i> / N 1 1 N / / ·

ACCOUNT HOLDE	ER INFORMATION			
Account Owners Na	me:		VinSolutions Account Number: 4829	
Address Line 1:			Phone Number:	
Address Line 2:			Fax Number:	
City:	State:	Zip:	Email:	
Opportunity ID: OP#-00222657			Dollar Amount: \$212.93	
Credit Card P				
			Visa Mastercard AmEx - Please circle one	

#### 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: