

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

Invoice For

Chrysler Dodge Jeep Ram of Gadsden (5745)

Invoice Number:OP#-00222668 Salesperson: Keith Kirby Date Created: 10/29/2012

Products

Troducts						
Product	Description		Qty.	List Price	Sales Price	Sales Tax
Drivers License Scanner	Automatically uploads custor	mer's information	1.0	\$999.00) \$999.00	
		Products/O				\$999.00
		Monthly R		_		\$0.00
		One Time S	Shippi	ng:		\$0.00
		Total Now	Due:			\$999.00
☐ Check By Fax	☐ One Time ACH	☐ One Time	Credi	t Card Au	thorizatio	on
Signature				D	ate	

Copyright VinSolutions.







6405 Metcalf Ave. Suite 400

Overland Park, KS 66202

T: 1.800.980.7488

F: 913.825.6396

www.vinsolutions.com

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
		/ N N / H H H N /	/ 1 N 1 <i>/ /</i> / N 1 1 N / / ·

ONE TIME	E AUTHORIZA	TION			
ACCOUNT HOLDE	R INFORMATION				
Account Owners Name:			VinSolutions Account Number: 5745		
Address Line 1:			Phone Number:		
Address Line 2:			Fax Number:		
City:	State:	Zip:	Email:		
Opportunity ID: OP#	±-00222668		Dollar Amount: \$999.00		
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: