

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

Sales and Support: 913-825-6124

Invoice For

Toyota of Bristol (5582)

Invoice Number: OP#-00266608

Salesperson: Robert Bloomquist Date Created: 3/15/2013

Product	Product Description		List Price	Sales Price	Sales Tax
Post Card 6" X 9"	Post Card 6" X 9" used for campaigns. Campaigns include a website banner, email template and landing page (requires VinSolutions' website). Phone calls, hang tags and posters are extra.	7500.0	\$3,750.00	\$2,925.00	\$270.56
Postage 1st Class Post Card	First class postage for post cards. 7500.0 \$2,4		\$2,400.00	\$2,400.00	\$222.00
Capture Garage Predictor Conquest Record	Capture Garage Predictor Conquest Record.	1000.0	\$100.00	\$80.00	\$7.40
Web site - Banner	Web site Banner for seasonal sales event campaign. 1.0				
Web site - Landing Page	Creation of dealer's landing page for campaign purposes. Does not contain inventory. 1.0				
Email Template	Dealer Branded email template from our library.	1.0			
	Products/One T One Time Shipp One Time Sales	oing:		,	405.00 \$0.00 499.96
	Monthly Recurred Monthl	ring:	les Tax:		\$0.00 \$0.00
	Monthly Recurr	ing: ing Sa	les Tax:	\$5,9	
	Monthly Recurr Monthly Recurr	ring: ring Sa		\$5,9	\$0.00
	Monthly Recurr Monthly Recurr Total Now Due	ring: ring Sa Recur	ring:	t to change	\$0.00 904.96
this invoice does not replace or sup	Monthly Recurred Monthly Recurred Total Now Due Total Monthly *Taxes are subject to state and *Does not include Dealer-paid.	ring: ring Sa Recur	ring:	t to change	\$0.00 904.96







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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
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ONE TIME	AUTHORIZA	ATION		
ACCOUNT HOLDER	R INFORMATION			
Account Owners Name:			VinSolutions Account Number: 5582	
Address Line 1:			Phone Number:	
Address Line 2:			Fax Number:	
City:	State:	Zip:	Email:	
Opportunity ID: OP#-	-00266608		Dollar Amount: \$5,904.96	
Credit Card Pa	vmont			
CREDIT CARD INFO	DRMATION			
Cardholder Name:			Visa Mastercard AmEx - Please circle one	

Check by Fax

Card Number:

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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:

Expiration Date:

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: