

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

Sales and Support: 913-825-6124

Invoice For

# Coeur d'Alene Honda (2383)

Invoice Number:OP#-00223281 Salesperson: Darin Mayville Date Created: 11/8/2012

### **Products**

Product	Description		Qty.	List Price	Sales Price	
Data Appending	Recurring appending your customer data.		1.0	\$149.00	\$149.00	
Data Appending onetime fee	Onetime fee to initially append cus	stomer data.	1.0	\$149.00	\$149.00	
*this invoice does not replace or supersede current billing		Products/One Time: Monthly Recurring: One Time Shipping: Total Now Due:  *Taxes are subject to state and local regulations and are subject to change  *Does not include Dealer-paid Travel Expenses related to onsite training				
☐ Check By Fax	☐ One Time ACH	☐ One Time	Credit	Card Autl	norization	1
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	RIZATIO	N

ONE TIME A	<b>AUTHORIZA</b>	TION	
ACCOUNT HOLDER IN	NFORMATION		
Account Owners Name:			VinSolutions Account Number: 2383
Address Line 1:			Phone Number:
Address Line 2:			Fax Number:
City:	State:	Zip:	Email:
Opportunity ID: OP#-002	223281		Dollar Amount: \$298.00
Credit Card Payn			
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: