

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

Sales and Support: 913-825-6124

Invoice For

Executive Dodge Jeep (3723)

Invoice Number:OP#-00208339 Salesperson: Robert Bloomquist Date Created: 7/6/2012

Products

Product	Description	Quantity	List Price	Total Price
Seasonal Sales Event - 2500 in Database	Includes: 2,500 full color custom 6"x11" postcards, postage included Custom campaign email template Custom websi banner Special webpage highlighting the event. All carry the same look and feel the drive your message home.	te e 1.0	\$2,899.00	\$2,200.00
Web site - Landing Page	Creation of dealer's landing page for campaign purposes. Does not contain inventory.	1.0	\$0.00	\$0.00
Email Template	Dealer Branded email template from our library.	r 1.0	\$0.00	\$0.00
Web site - Banner	Web site Banner for seasonal sales even campaign.	t 1.0	\$0.00	\$0.00
*this invoice does not replace or supersede current billing			Products/One Time: Monthly Recurring: One Time Shipping:	
		Total Du		\$2,200.00
☐ Check By Fax ☐ One Time ACH ☐ One Time			Authorization	on
Signature			Date	

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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.

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ACCOUNT HOLDER INFORMATION				
Account Owners Name:			VinSolutions Account Number: 3723	
Address Line 1:			Phone Number:	
Address Line 2:			Fax Number:	
City:	State:	Zip:	Email:	
Opportunity ID: OP#-00208339		·	Dollar Amount: \$2,200.00	

Credit Card Payment

CREDIT CARD INFORMATION	
Cardholder Name:	Visa Mastercard AmEx - Please circle one
Card Number:	Expiration Date:

Check by Fax

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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:	

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: