

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

Sales and Support: 913-825-6124

Invoice For

Littleton Chevrolet Buick (2837)

Invoice Number: OP#-00223490

Salesperson: Robert Bloomquist Date Created: 11/16/2012

Products

Products						
Product	Description		Qty.	List Price	Sales Price	
Creative/Design Time - Custom Campaign	Custom creative/design time 5 billable hours of creative ti revision rounds.		1.0	\$799.00		
*this invoice does not replace or	supersede current billing	Products/One Monthly Rec One Time Sh Total Now I	curring nipping	g:		\$0.00 \$0.00 \$0.00 \$0.00
		*Taxes are subject subject to change *Does not include I onsite training				
☐ Check By Fax	☐ One Time ACH	☐ One Time C	Credit	Card Aut	horization	
Signature				Da	te	

Copyright VinSolutions.







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 AUTHORIZATION					
ACCOUNT HOLDE	R INFORMATION				
Account Owners Name:			VinSolutions Account Number: 2837		
Address Line 1:			Phone Number:		
Address Line 2:			Fax Number:		
City:	State:	Zip:	Email:		
Opportunity ID: OP#	-00223490		Dollar Amount: \$0.00		
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: