

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

Sales and Support: 913-825-6124

Invoice For

Brooks Auto Group LLC Chrysler Dodge Jeep Ram (5440)

Invoice Number:OP#-00215204 Salesperson: Keith Kirby Date Created: 9/6/2012

Products

Product	Description		Quantity	List Price	Total Price
Black Book Used Car Pricing	Black Book pricing of used	Black Book pricing of used cars		\$129.00	\$99.00
NADA Used Car Pricing Tool	NADA used car pricing tool		1.0	\$129.00	\$99.00
Black Book used car pricing onetime fee	Black Book used car pricing onetime fee		1.0	\$129.00	\$99.00
NADA used car pricing tool onetime fee	Onetime fee for NADA used car pricing		1.0	\$129.00	\$99.00
*this invoice does not replace or supersede current billing			Products/One Time: Monthly Recurring: One Time Shipping:		\$198.00 \$198.00 \$0.00
			Total D	oue Now:	\$396.00
☐ Check By Fax ☐	One Time ACH	☐ One Time O	Credit Card	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 HOLDE	R INFORMATION		
Account Owners Nan	ne:		VinSolutions Account Number: 5440
Address Line 1:			Phone Number:
Address Line 2:			Fax Number:
City:	State:	Zip:	Email:
Opportunity ID: OP#	-00215204		Dollar Amount: \$396.00

Credit Card Payment

CREDIT CARD INFORMATION	
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: