

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

Sales and Support: 913-825-6124

Invoice For

# Wray Automotive (4969)

Invoice Number:OP#-00213522 Salesperson: Keith Kirby Date Created: 8/15/2012

#### **Products**

Product	Description	Quantity	Total Price	
Custom Form Design	Design of custom forms	1.0	\$199.00	
*this invoice does not replace or supe	rsede current billing	Products/One Time: Monthly Recurring: One Time Shipping:	\$199.00 \$0.00 \$0.00	
		<b>Total Due Now:</b>	\$199.00	
☐ Check By Fax ☐ One Time ACH		☐ One Time Credit Card Authorization		
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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ONE TIME AUTHORIZATION				
ACCOUNT HOLDER INFORM	MATION			
Account Owners Name:			VinSolutions Account Number: 4969	
Address Line 1:			Phone Number:	
Address Line 2:			Fax Number:	
City:	State:	Zip:	Email:	
Opportunity ID: OP#-00213522	,		Dollar Amount: \$199.00	
Credit Card Payment CREDIT CARD INFORMATIO	ON			
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: