Invoice For

# Bergey's Chrysler Jeep Dodge Ram (5495)

Invoice Number:OP#-00222647

Salesperson: Keith Kirby Date Created: 10/26/2012

## Products

| Product | Description | Qty. | List Price | Sales Price | Sales Tax |
|---------|-------------|------|-----------|-------------|-----------|
| Drivers License Scanner | Automatically uploads customer's information | 7.0 | $6,993.00 | $5,593.00 | $335.58 |

**\*this invoice does not replace or supersede current billing**

| | |
|---|---:|
| Products/One Time: | $5,593.00 |
| Monthly Recurring: | $0.00 |
| One Time Shipping: | $0.00 |
| Sales Tax: | $335.58 |
| **Total Now Due:** | **$5,928.58** |

☐ Check By Fax     ☐ One Time ACH     ☐ One Time Credit Card Authorization

Signature _____     Date _____

*Copyright VinSolutions.*

# Payment Authorization

VinSolutions
6405 Metcalf Ave Suite 400
Overland Park, KS 66202
(P) 913-825-6300
(F) 617-904-1618

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 AUTHORIZATION

| ACCOUNT HOLDER INFORMATION | | | | |
|---|---|---|---|---|
| Account Owners Name: | | | VinSolutions Account Number: 5495 | |
| Address Line 1: | | | Phone Number: | |
| Address Line 2: | | | Fax Number: | |
| City: | State: | Zip: | Email: | |
| Opportunity ID: OP#-00222647 | | | Dollar Amount: $5,928.58 | |

### 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: |