

VinSolutions 6405 Metcalf Ave Suite 400 Overland Park, KS 66202 www.vinsolutions.com Sales and Support: 913-825-6124

Invoice For

# **McGrath Acura of Westmont (4778)**

Invoice Number:OP#-00199139 Salesperson: Darin Mayville Date Created: 6/11/2012

#### **Products**

Product	Description		Quantity	List Price	Total Price
Trainer - One Day	One day of on-site training vertrainer. All travel expenses p		2.0	\$2,698.00	\$2,000.00
*this invoice does not replace or supers	ede current billing	N	roducts/One Ionthly Red ne Time Sh	curring:	\$2,000.00 \$0.00 \$0.00
Charle Dev For	One Time ACH	☐ One Time C	Total Du		\$2,000.00
☐ Check By Fax ☐	Olle Tillle ACH		ieun Caru	Aumonzan	JII
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.

ONE	TIME	AIIT	HOF.	RIZA	TION
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ACCOUNT HOLDER INFORMATION				
Account Owners Name:			VinSolutions Account Number: 4778	
Address Line 1:			Phone Number:	
Address Line 2:			Fax Number:	
City:	State:	Zip:	Email:	
Opportunity ID: OP#-00199139			Dollar Amount: \$2,000.00	

### **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: