

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

Sales and Support: 913-825-6124

Invoice For

Henkel Chrysler Jeep Dodge (3444)

Invoice Number:OP#-00267745 Salesperson: Matt Griffis Date Created: 3/25/2013

Products						
Product	Descript	Description		List Price	Sales Price	Sales Tax
Buyers Guide - English500	English Buyers Guide - price p	per 500	1.0	\$149.00	\$149.00	\$8.94
		Products/One T	ime:		\$ 1	149.00
		One Time Shipping:		\$0.00		
	One Time Sales Tax:				\$8.94	
Monthly Rec		Monthly Recur	_			\$0.00
		Monthly Recur		ales Tax:		\$0.00
		Total Now Due			\$1	157.94
		Total Monthly	Recui	rring:		\$0.00
		*Taxes are subject to state and	local regulat	ions and are subject	to change	
		*Does not include Dealer-paid	Travel Expe	nses related to onsite	e training	
*this invoice does not replace or	supersede current billing					
☐ Check By Fax	☐ One Time ACH	☐ One Time	Credit	Card Autl	norization	1

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Signature





Date

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	RIZATION
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ONE TIME AUTHORIZATION				
ACCOUNT HOLDE	R INFORMATION			
Account Owners Name:			VinSolutions Account Number: 3444	
Address Line 1:			Phone Number:	
Address Line 2:			Fax Number:	
City:	State:	Zip:	Email:	
Opportunity ID: OP#	-00267745		Dollar Amount: \$157.94	
Credit Card Pa	nyment			
CREDIT CARD INF	ORMATION			
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)

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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: