

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

Invoice For

Gunn Honda (3869)

Invoice Number:OP#-00215199 Salesperson: Phil Dixon Jr Date Created: 9/6/2012

Products

Product	Description		Quantity	Total Price
Web site - Landing Page Ala Carte	Creation of dealer's landing page for campaign purposes. Does not contain 1.0 inventory.		\$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
☐ Check By Fax	□ One Time ACH	☐ One Time	Total Due Now: e Credit Card Authorizat	\$199.00
Signature			Date	

Copyright VinSolutions.







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
		/ N N / H H H N	/ 1 N 1 <i>/ /</i> / N 1 1 N / / ·

ONE TIME AUTHORIZATION				
ACCOUNT HOLDER	R INFORMATION			
Account Owners Nam	ne:		VinSolutions Account Number: 3869	
Address Line 1:			Phone Number:	
Address Line 2:			Fax Number:	
City:	State:	Zip:	Email:	
Opportunity ID: OP#-	-00215199		Dollar Amount: \$199.00	
Credit Card Pa	vment			
CREDIT CARD INFO				
Cardholder Name:			Visa Mastercard AmEx - Please circle one	

Check by Fax

Card Number:

•	
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:

Expiration Date:

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: