

Invoice For

Test Dealer (1)

Invoice Number: OP#-00165390

Salesperson: Ryan Rigdon Date Created: 5/16/2012

Products

Product	Description	Quantity	List Price	Total Price
Custom Sales Event - 5000 Conquest	Includes: 5,000 full color custom event 6"x9" postcards, postage included Custom campaign email template Custom website banner Special webpage highlighting the event. All carry the same look and feel to drive your message home.	1.0	\$6,949.00	\$5,000.00
Web site - Banner	Web site Banner for seasonal sales event campaign.	1.0	\$0.00	\$0.00
Post Card 6" X 9"	Post Card 6" X 9" used with seasonal sales events.	1.0	\$0.00	\$0.00
Web site - Landing Page	Creation of dealer's landing page for campaign purposes. Does not contain inventory.	1.0	\$0.00	\$0.00
Email Template	Custom email template.	1.0	\$0.00	\$0.00
Creative/Design time - Postcard	Design charge for custom postcards. Four hours.	1.0	\$0.00	\$0.00
Creative/Design time - Email	Design charge for custom Email template. Two hours.	1.0	\$0.00	\$0.00
Creative/Design time - Web Banner	Design charge for custom web banner. Half hour.	1.0	\$0.00	\$0.00
Creative/Design Time - Landing Page	Design charge for custom Landing Page. One hour.	1.0	\$0.00	\$0.00

Total: \$5,000.00

Shipping: \$0.00

Invoice Total

Total Due NOW: \$5,000.00

☐ Check By Fax

☐ One Time ACH

☐ One Time Credit Card Authorization

Signature

Date

Copyright VinSolutions.

CONTRACTS

HASSLES

SERVERS

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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 AUTHORIZATION

ACCOUNT HOLDER INFORMATION			
Account Owners Name: Brian Fox			Client ID: 1
Address Line 1: 6405 Metcalf Ave, 4th Floor			Phone Number: (800) 101-0101
Address Line 2:			Fax Number: (617) 904-1618
City: Overland Park	State: KS	Zip: 66202	Email: brian.fox@vinsolutions.com
Opportunity ID: OP#-00165390			Dollar Amount: \$5,000.00

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: