

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

Sales and Support: 913-825-6124

Invoice For

Timber Ford of Hayward (2950)

Invoice Number:OP#-00222907 Salesperson: Carrie Bermel Date Created: 10/30/2012

Products

Product	Description		Qty.	List Price	Sales Price	Sales Tax
Data Appending	Recurring appending your customer data.		1.0	\$149.00	\$149.00	
Data Appending onetime fee	Onetime fee to initially append cust	omer data.	1.0	\$149.00	\$149.00	
*this invoice does not replace or supe	ersede current billing	Products/On Monthly Re One Time S	currin	g:		\$149.00 \$149.00 \$0.00
☐ Check By Fax	□ One Time ACH	11 0			\$298.00	
Signature				Da	te	

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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	AUTHO	RIZA	TION

ONE TIME	E AUTHORIZA	ATION	
ACCOUNT HOLDE	R INFORMATION		
Account Owners Nar	ne:		VinSolutions Account Number: 2950
Address Line 1:			Phone Number:
Address Line 2:			Fax Number:
City:	State:	Zip:	Email:
Opportunity ID: OP#	-00222907		Dollar Amount: \$298.00
Credit Card Pa			
CREDIT CARD INF	ORMATION		
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: