

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

Sales and Support: 913-825-6124

Invoice For

# **Hartford Toyota Superstore (4315)**

Invoice Number:OP#-00209810 Salesperson: Robert Bloomquist Date Created: 7/25/2012

#### **Products**

Product	Description	Quantity	List Price	Total Price
Post Card 6" X 9"	Post Card 6" X 9" used for campaigns. Campaigns include a website banner, email template and landing page. Table tops, phone calls, hang tags and posters are extra.	5000.0	\$2,500.00	\$2,350.00
Postage Standard Class	Postage Standard Class.	5000.0	\$1,400.00	\$1,400.00
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	Dealer Branded email template from our library.	1.0	\$0.00	\$0.00
Web site - Banner	Web site Banner for seasonal sales even campaign.	t 1.0	\$0.00	\$0.00
*this invoice does not replace or so	upersede current billing	Products/On Monthly Red One Time Sh	curring:	\$3,750.00 \$0.00 \$0.00
		Total Du	e Now:	\$3,750.00
☐ Check By Fax	☐ One Time ACH ☐ One Time	e Credit Card	Authorization	on
Signature			Date	

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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	AUTHO	RIZATION
		/ <b>N N</b> / <b>H H H N</b> /	/ 1 N 1 <i>/ /</i> / N 1 1 N / / ·

Account Owners Name:			VinSolutions Account Number: 4315
Address Line 1:			Phone Number:
Address Line 2:			Fax Number:
City:	State:	Zip:	Email:
Opportunity ID: OP#-002	09810		Dollar Amount: \$3,750.00

Visa Mastercard AmEx - Please circle one

### Check by Fax

Cardholder Name: 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: