

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

Invoice For

Precision Ford (5295)

Invoice Number:OP#-00213519 Salesperson: Keith Kirby Date Created: 8/15/2012

Products

Product	Description	Quantity	Total Price
AIS Rebates - Desking Integration	Third party vendor, - incentive integra into Desking module.	tion 1.0	\$199.00
AIS Rebates - Desking integration onetime fee	Onetime fee for AIS Rebates - incentive integration into Desking module	ve 1.0	\$199.00
*this invoice does not replace or su	persede current billing	Products/One Time: Monthly Recurring: One Time Shipping:	\$199.00 \$199.00 \$0.00
☐ Check By Fax	☐ One Time ACH ☐ One Time	Total Due Now: ne Credit Card Authorizat	\$398.00 ion
Signature		Date	

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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	DRIZAT	LIUN

ACCOUNT HOLDER INFORMATION				
Account Owners Name:		VinSolutions Account Number: 5295		
Address Line 1:		Phone Number:		
		Fax Number:		
State:	Zip:	Email:		
519		Dollar Amount: \$398.00		
	State:	State: Zip:		

Credit Card Payment

CREDIT CARD INFORMATION	
Cardholder Name:	Visa Mastercard AmEx - Please circle one
Card Number:	Expiration Date:

Check by Fax

v	
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: