

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

Invoice For

Haley Ford (2977)

Invoice Number:OP#-00210144 Salesperson: Carrie Bermel Date Created: 8/1/2012

Products

Product	Description	Quantity	Total Price
VinSticker - REORDER 250 Custom	Reorder custom four color V window sticker - price per 2	1 ()	\$279.00
*this invoice does not replace or supers	sede current billing	Products/One Time: Monthly Recurring: One Time Shipping:	\$279.00 \$0.00 \$15.00
☐ Check By Fax □	One Time ACH	Total Due Now: ☐ One Time Credit Card Authorizat	\$294.00 tion
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	RIZATIO	N

ONE TIME AUTHORIZATION				
ACCOUNT HOLDE	R INFORMATION			
Account Owners Nar	ne:		VinSolutions Account Number: 2977	
Address Line 1:			Phone Number:	
Address Line 2:			Fax Number:	
City:	State:	Zip:	Email:	
Opportunity ID: OP#	-00210144		Dollar Amount: \$294.00	
Credit Card Pa				
Cardholder Name:			Visa Mastercard AmEx - Please circle one	
Card Number:			Expiration Date:	

Check by Fax

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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: