

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

Invoice For

# Paramount Auto of Hickory (4681)

Invoice Number:OP#-00221179 Salesperson: Matt Griffis Date Created: 10/10/2012

#### **Products**

Product	Description		Qty.	List Price	Sales Price	Sales Tax
	Reorder custom four color Vinstickers	voim dove atial can				
VinSticker - REORDER 1000 Custom	price per 1000	window sticker -	1.0	\$899.00	\$899.00	\$62.93
Buyers Guide - English1000	English Buyers Guide - price per 1000		1.0	\$279.00	\$279.00	\$19.53
		Products/On Monthly Red One Time S Sales Tax: <b>Total Now</b>	currin hippir	g:		\$1,178.00 \$0.00 \$60.00 \$82.46 <b>\$1,320.46</b>
☐ Check By Fax [	☐ One Time ACH	☐ One Time (	Credit	Card Autl	horizatio	on
Signature				Da	te	

Copyright VinSolutions.







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	AUTH	ORIZA	TION

ACCOUNT HOLDE	R INFORMATION		
Account Owners Na	me:		VinSolutions Account Number: 4681
Address Line 1:			Phone Number:
Address Line 2:			Fax Number:
City:	State:	Zip:	Email:
Opportunity ID: OP	‡-00221179		Dollar Amount: \$1,238.00
Credit Card P			
CREDIT CARD INF	UKWATION		1
	ORMATION		Visa Mastercard AmEx - Please circle one

### 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: