

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

Invoice For

Keffer Kia (3694)

Invoice Number:OP#-00214460 Salesperson: Matt Griffis Date Created: 8/22/2012

Products

Product	Description		Quantity	Total Price
Web site - Coupon Pages	website. Includes Carfa vehicle valuation coupe brochure coupon, as we card coupons for test do	Web site coupon pages for Dealer's website. Includes Carfax and Autocheck vehicle valuation coupons, request a brochure coupon, as well as \$10 iTunes card coupons for test drives and a \$300 iTunes card coupon for new vehicle purchases.		\$229.00
*this invoice does not replace or s	upersede current billing		Products/One Time Monthly Recurring One Time Shipping	g: \$0.00
☐ Check By Fax	□ One Time ACH	☐ One Time	Total Due Now Credit Card Authoriz	
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.

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ONE TIME AUTHORIZATION				
ACCOUNT HOLDE	R INFORMATION			
Account Owners Nar	me:		VinSolutions Account Number: 3694	
Address Line 1:			Phone Number:	
Address Line 2:			Fax Number:	
City:	State:	Zip:	Email:	
Opportunity ID: OP#	‡-00214460		Dollar Amount: \$229.00	
Credit Card Payment CREDIT CARD INFORMATION				
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)

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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: