

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

Sales and Support: 913-825-6124

Purchase Agreement Summary For

Kocourek Auto Group (4260)

Agreement Number:OP#-00318916 Salesperson: Soren Blair Date Created: 10/31/2013

Products						
Product	Descri	Description		List Price	Sales Price	
Website - Design Upgrade	Change web site to differen	t look and feel.	6.0	\$4,794.00	\$2,694.00	
		Products/One Tone Time Ship One Time Sale Monthly Recur Total Now Du Total Monthly	ping: s Tax: ring: e:	rring:		\$94.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
		*Taxes are subject to state and *Does not include Dealer-paid				
☐ Check By Fax	☐ One Time ACH	☐ One Time	Credit	Card Autl	norization	1
Signature				Da	te	

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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	AUTHORIZA	TION		
ACCOUNT HOLDER	INFORMATION			
Account Owners Name:			VinSolutions Account Number: 4260	
Address Line 1:			Phone Number:	
Address Line 2:			Fax Number:	
City:	State:	Zip:	Email:	
Opportunity ID: OP#-	00318916		Dollar Amount: \$2,694.00	
Credit Card Pag				
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: