CUSTOM FRAMING INVOICE # 226



GALLERY ART

20633 BISCAYNE BLVD., AVENTURA, FL 33180 IN THE PROMENADE SHOPS (305) 932-6166 • FAX (305) 937-2125

GallArt.com email: Ken@GallArt.com

HOME PHONE (954) 913-6163				ONE		FAX				DATE July 27 2009					
LAST NAME Delle Cave					FIRST NAME Oriana										
ADDRESS 3101 s oc	cean driv	e unit 40	05												
CITY Hollywoo	d	STATE FL	COUNTRY United Sta		POSTAL CODE 33019		mishidellecave@hotmail.com						COMPANY NAME		
METHOD OF PAYMENT VISAVMC □ AMEX □ CHECK □ CASH □ OTHER ☑												ORIGIN			
CREDIT CARD #								EXP. 01/09	AUTH. CODE	DRI	DRIVER'S LICENSE#				
QUANTITY TITLE				ARTIST		DESCRIPTI		ION	PRODUCT ID			PRICE		EXT	
1	HOPE						SIGNATURE ON LOWER LEFT P		G16928					\$70.00	\$70.00
SPECIAL INSTRUCTIONS Purchased on ebay. User id frecklesmiami												AMOUNT OF SALE		\$70.00	
													TAX	(\$4.90
													TOTAL	SALE	\$74.90
													SHIPP	ING	\$0.00
													AMOUNT	PAID	\$74.90
RECEIVED	BY:								DATE:	JUL	Y 27, 2009		BALANCE DUE		\$0.00

ALL CLAIMS AND RETURNED GOODS MUST BE ACCOMPANIED BY THIS INVOICE

THANK YOU