



INVOICE # A5014

HOME PHONE	BUSINESS PHONE	CELL PHONE (905) 407-6685	PHONE OUTSIDE THE US	FAX	CONSULTANT JJ	DATE June 21 2017
LAST NAME Nichole		FIRST NAME Carol		COMPANY NAME		
ADDRESS 5112 Lakeshore Rd		CITY Burlington	STATE	COUNTRY ON, Canada	POSTAL CODE L7L 1B9	
EMAIL ADDRESS carolenichol@hotmail.com			WEBSITE		DRIVER'S LICENSE #	
METHOD OF PAYMENT VISA/MC <input checked="" type="checkbox"/> AMEX <input type="checkbox"/> CHECK <input type="checkbox"/> CASH <input type="checkbox"/> OTHER <input type="checkbox"/>						ORIGIN
CREDIT CARD # XXXX-XXXX-XXXX-			EXP. 01/17	AUTH. CODE	ESTIMATE <input type="checkbox"/>	
QUANTITY	TITLE	ARTIST	DESCRIPTION	ART ID	PRICE	EXT
1	ASSORTMENT		4 Pieces framed -professionally packaged and shipped	0000	\$500.00	\$500.00
SPECIAL INSTRUCTIONS					AMOUNT OF SALE	\$500.00
					TAX	\$0.00
					TOTAL SALE	\$500.00
					SHIPPING	\$0.00
					AMOUNT PAID	\$500.00
RECEIVED BY:				DATE: JUNE 21, 2017	BALANCE DUE	\$0.00

ALL CLAIMS AND RETURNED GOODS **MUST BE** ACCOMPANIED BY THIS INVOICE

THANK YOU