



INVOICE # A5373

HOME PHONE (305) 445-6090	BUSINESS PHONE	CELL PHONE (786) 899-1967	PHONE OUTSIDE THE US	FAX	CONSULTANT Ken	DATE January 15 2018
LAST NAME		FIRST NAME		COMPANY NAME Grove Fine Art		
ADDRESS 3444 Main St #20		CITY Miami	STATE FL	COUNTRY USA	POSTAL CODE 33133	
EMAIL ADDRESS castledesigns1@me.com		WEBSITE			DRIVER'S LICENSE #	
METHOD OF PAYMENT VISA/MC <input 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. 01/18	AUTH. CODE	ESTIMATE <input type="checkbox"/>	
QUANTITY	TITLE	ARTIST	DESCRIPTION	ART ID	PRICE	EXT
1	CLAIRE NUDE	WESSELMANN, TOM	HAND SIGNED AND NUMBERED....	G16386	\$10,000.00	\$10,000.00
SPECIAL INSTRUCTIONS Will pick up on 1/16/18 and leave check to be put on hold until artwork is returned.					AMOUNT OF SALE	\$10,000.00
					TAX	\$0.00
					TOTAL SALE	\$10,000.00
					SHIPPING	\$0.00
					AMOUNT PAID	\$0.00
RECEIVED BY:				DATE: JANUARY 15, 2018	BALANCE DUE	\$10,000.00

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

THANK YOU