



CUSTOM FRAMING

INVOICE # 228

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		WORK PHONE		FAX	CONSULTANT		DATE July 27 2009	
LAST NAME aaaaaaaaaaaaaaaa				FIRST NAME aaaaaaaaaaaaaaaa				
ADDRESS								
CITY	STATE	COUNTRY	POSTAL CODE		EMAIL ADDRESS		COMPANY NAME	
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 #				EXP. 01/09	AUTH. CODE	DRIVER'S LICENSE #		
QUANTITY	TITLE	ARTIST	DESCRIPTION		PRODUCT ID		PRICE	EXT
1	SDAF				0000	FRAMING	\$100.00	\$100.00
SPECIAL INSTRUCTIONS							AMOUNT OF SALE	\$100.00
							TAX	\$0.00
							TOTAL SALE	\$100.00
							SHIPPING	\$0.00
							AMOUNT PAID	\$0.00
RECEIVED BY:							DATE: JULY 27, 2009	BALANCE DUE \$100.00

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

THANK YOU