



INVOICE # A6284

| | | | | | | |
|---|------------------|--------------------|------------------------------|--------------|--------------------------------------|-------------------------|
| HOME PHONE (920) 342-1482 | BUSINESS PHONE | CELL PHONE | PHONE OUTSIDE THE US | FAX | CONSULTANT Waseem | DATE October 29 2019 |
| LAST NAME Anderson | | FIRST NAME Lisa | | COMPANY NAME | | |
| ADDRESS N1083 County Road Q | | CITY Watertown | STATE WI | COUNTRY | POSTAL CODE 53098-4124 | |
| EMAIL ADDRESS motherofsteen@yahoo.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-ypal | | | EXP. 01/19 | AUTH. CODE | ESTIMATE <input type="checkbox"/> | |
| QUANTITY | TITLE | ARTIST | DESCRIPTION | ART ID | PRICE | EXT |
| 1 | AFTERNOON REPOSE | PINO | Hand signed and numbered.... | G22643 | \$850.00 | \$850.00 |
| SPECIAL INSTRUCTIONS Thank you for your purchase. Please let me know if I can be of any further assistance. Regards, Waseem TO BE SHIPPED | | | | | AMOUNT OF SALE | \$850.00 |
| | | | | | TAX | \$0.00 |
| | | | | | TOTAL SALE | \$850.00 |
| | | | | | SHIPPING | \$0.00 |
| | | | | | AMOUNT PAID | \$850.00 |
| RECEIVED BY: | | | | | DATE: OCTOBER 29, 2019 | BALANCE DUE \$0.00 |

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

THANK YOU