



INVOICE # A6845

HOME PHONE	BUSINESS PHONE	CELL PHONE (773) 256-7361	PHONE OUTSIDE THE US	FAX	CONSULTANT Lexy	DATE October 24 2020
LAST NAME Amir		FIRST NAME Lily		COMPANY NAME		
ADDRESS 45 SW 9th ST, Unit 2610			CITY Miami	STATE FL	COUNTRY	POSTAL CODE
EMAIL ADDRESS lilyamir17@gmail.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. 01/20	AUTH. CODE	ESTIMATE <input type="checkbox"/>	
QUANTITY	TITLE	ARTIST	DESCRIPTION	ART ID	PRICE	EXT
1	THE OBVIOUS MANIFESTATION OF A FACE	GORE, ALEXANDER	Hand signed by the artist...	G28178	\$250.00	\$250.00
SPECIAL INSTRUCTIONS					AMOUNT OF SALE	\$250.00
					TAX	\$17.50
					TOTAL SALE	\$267.50
					SHIPPING	\$0.00
					AMOUNT PAID	\$267.50
RECEIVED BY:				DATE: OCTOBER 24, 2020	BALANCE DUE	\$0.00

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

THANK YOU