



INVOICE # A5477

HOME PHONE	BUSINESS PHONE	CELL PHONE (305) 932-6166	PHONE OUTSIDE THE US	FAX	CONSULTANT Jeremiah	DATE March 18 2018
LAST NAME Wharton		FIRST NAME Orlando		COMPANY NAME		
ADDRESS	CITY	STATE	COUNTRY	POSTAL CODE		
EMAIL ADDRESS wahartonberg@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 checked="" 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	KUBRICK MAD HECTIC 400%	KAWS	KAWS Hectic Exclusive 400...	G28404	\$0.00	\$0.00
1	COMPANION - BLUSH SET OF 2	KAWS	Limited Sold Out Release ...	G28973	\$0.00	\$0.00
1	COMPANION - BLUSH SET OF 2	KAWS	Limited Sold Out Release ...	G28973	\$0.00	\$0.00
1	SPECIAL PACKAGE DEAL			0000	\$1,000.00	\$1,000.00
SPECIAL INSTRUCTIONS Forms Of Payment: Debit Card Invoice Valid for 5 business days or until balance has been paid in full.					AMOUNT OF SALE	\$1,000.00
					TAX	\$70.00
					TOTAL SALE	\$1,070.00
					SHIPPING	\$0.00
					AMOUNT PAID	\$0.00
RECEIVED BY:					DATE: MARCH 18, 2018	BALANCE DUE \$1,070.00

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

THANK YOU