



# INVOICE # 3427

HOME PHONE	BUSINESS PHONE	CELL PHONE	PHONE OUTSIDE THE US	FAX	CONSULTANT	DATE November 25 2014
LAST NAME Rucker		FIRST NAME Steve		COMPANY NAME		
ADDRESS		CITY	STATE	COUNTRY	POSTAL CODE	
EMAIL ADDRESS steverucker@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 OTHER
CREDIT CARD # XXXX-XXXX-XXXX-			EXP. 01/14	AUTH. CODE	ESTIMATE <input type="checkbox"/>	
QUANTITY	TITLE	ARTIST	DESCRIPTION	PRODUCT ID	PRICE	EXT
1	TEST			0000	\$40.00	\$40.00
SPECIAL INSTRUCTIONS					AMOUNT OF SALE	\$40.00
					TAX	\$0.00
					TOTAL SALE	\$40.00
					SHIPPING	\$0.00
					AMOUNT PAID	\$0.00
RECEIVED BY:				DATE: NOVEMBER 25, 2014	BALANCE DUE	\$40.00

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

THANK YOU