



INVOICE # 3397

| | | | | | | |
|---|----------------|------------------------------|---------------------------------|--------------|--------------------------------------|-----------------------------|
| HOME PHONE | BUSINESS PHONE | CELL PHONE (513) 871-2880 | PHONE OUTSIDE THE US | FAX | CONSULTANT | DATE November 17 2014 |
| LAST NAME Levin | | FIRST NAME Max | | COMPANY NAME | | |
| ADDRESS | CITY | STATE | COUNTRY | POSTAL CODE | | |
| EMAIL ADDRESS maximillians1@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. 01/14 | AUTH. CODE | ESTIMATE <input type="checkbox"/> | |
| QUANTITY | TITLE | ARTIST | DESCRIPTION | PRODUCT ID | PRICE | EXT |
| 1 | LULU | WESSELMANN, TOM | HAND SIGNED AND NUMBERED ... | G16948 | \$7,500.00 | \$7,500.00 |
| SPECIAL INSTRUCTIONS | | | | | AMOUNT OF SALE | \$7,500.00 |
| | | | | | TAX | \$0.00 |
| | | | | | TOTAL SALE | \$7,500.00 |
| | | | | | SHIPPING | \$0.00 |
| | | | | | AMOUNT PAID | \$0.00 |
| RECEIVED BY: | | | | | DATE: NOVEMBER 17, 2014 | BALANCE DUE \$7,500.00 |

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

THANK YOU