



INVOICE # 3716

HOME PHONE	BUSINESS PHONE	CELL PHONE	PHONE OUTSIDE THE US	FAX	CONSULTANT LEXY	DATE May 05 2015
LAST NAME Morin		FIRST NAME Andrea		COMPANY NAME		
ADDRESS 30 Hillside Terrace		CITY Irvington	STATE NY	COUNTRY USA	POSTAL CODE 10533	
EMAIL ADDRESS andrea.marie.morin@gmail.com		WEBSITE			DRIVER'S LICENSE #	
METHOD OF PAYMENT VISA/MC <input type="checkbox"/> AMEX <input type="checkbox"/> CHECK <input checked="" type="checkbox"/> CASH <input type="checkbox"/> OTHER <input type="checkbox"/>						ORIGIN PHONE
CREDIT CARD # XXXX-XXXX-XXXX-			EXP. 01/15	AUTH. CODE	ESTIMATE <input type="checkbox"/>	
QUANTITY	TITLE	ARTIST	DESCRIPTION	PRODUCT ID	PRICE	EXT
1	PACKAGE DEAL			0000	\$10,000.00	\$10,000.00
1	CALLA LILIES, VERONA II	DINE, JIM	Hand signed and numbered....	G21717	\$0.00	\$0.00
1	CALLA LILIES, VERONA III	DINE, JIM	Hand signed and numbered....	G21718	\$0.00	\$0.00
1	CALLA LILIES, VERONA I	DINE, JIM	Hand signed and numbered....	G21719	\$0.00	\$0.00
SPECIAL INSTRUCTIONS TERMS OF PAYMENT: CHECK MADE PAYABLE TO GALLERY ART INCLUDES ARTWORK, WITH FRAMES PROFESSIONALLY PACKAGED AND SHIPPED TO NY WITH ACCOMPANYING CERTIFICATES OF AUTHENTICITY INVOICE VALID FOR 5 BUSINESS DAYS					AMOUNT OF SALE	\$10,000.00
					TAX	\$0.00
					TOTAL SALE	\$10,000.00
					SHIPPING	\$0.00
					AMOUNT PAID	\$0.00
RECEIVED BY:					DATE: MAY 05, 2015	BALANCE DUE \$10,000.00

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

THANK YOU