



CUSTOM FRAMING

INVOICE # 216

GALLERY ART
20633 BISCAYNE BLVD., AVENTURA, FL 33180
IN THE PROMENADE SHOPS
(305) 932-6166 • FAX (305) 937-2125
GallArt.com email: Ken@GallArt.com

HOME PHONE 954-222-2222		WORK PHONE 954-333-3333		FAX 954-555-5555		CONSULTANT		DATE July 22 2009	
LAST NAME guy			FIRST NAME New						
ADDRESS 123 Test Street Suite 100									
CITY Fort Lauderdale		STATE FL	COUNTRY United States		POSTAL CODE 33333-1234		EMAIL ADDRESS steve@rekal.net		COMPANY NAME Acme Beta Testing
METHOD OF PAYMENT VISA/MC <input checked="" type="checkbox"/> AMEX <input type="checkbox"/> CHECK <input type="checkbox"/> CASH <input type="checkbox"/> OTHER <input type="checkbox"/>								ORIGIN PHONE	
CREDIT CARD # 4111111111111111					EXP. 10/19	AUTH. CODE		DRIVER'S LICENSE #	
QUANTITY	TITLE	ARTIST		DESCRIPTION		PRODUCT ID		PRICE	EXT
1	SADF	ASDF		adf		0000		\$500.00	\$500.00
SPECIAL INSTRUCTIONS								AMOUNT OF SALE	\$500.00
								TAX	\$0.00
								TOTAL SALE	\$500.00
								SHIPPING	\$0.00
								AMOUNT PAID	\$0.00
RECEIVED BY:						DATE: JULY 22, 2009		BALANCE DUE	\$500.00

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

THANK YOU