



INVOICE # 3584

HOME PHONE (305) 445-6090	BUSINESS PHONE	CELL PHONE	PHONE OUTSIDE THE US	FAX	CONSULTANT KEN	DATE February 12 2015
LAST NAME ROBERTS		FIRST NAME LES		COMPANY NAME VIA ART GALLERY		
ADDRESS 5959 Collins Ave		CITY Miami Beach		STATE FL	COUNTRY USA	POSTAL CODE 33140
EMAIL ADDRESS castledesigns1@mac.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. 01/15	AUTH. CODE	ESTIMATE <input type="checkbox"/>	
QUANTITY	TITLE	ARTIST	DESCRIPTION	PRODUCT ID	PRICE	EXT
1	SCULPTURE BOOK	SALVADOR DALI		0000		\$2,500.00 \$2,500.00
1	SCULPTURE BOOK	SALVADOR DALI	CUSTOM FRAME	0000	FRAMING	\$300.00 \$300.00
SPECIAL INSTRUCTIONS FL RESALE CERTIFICATE OF FILE					AMOUNT OF SALE	\$2,800.00
					TAX	\$0.00
					TOTAL SALE	\$2,800.00
					SHIPPING	\$0.00
					AMOUNT PAID	\$2,800.00
RECEIVED BY:					DATE: FEBRUARY 12, 2015	BALANCE DUE \$0.00

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

THANK YOU