



# INVOICE # A6025

HOME PHONE (214) 250-7011	BUSINESS PHONE	CELL PHONE	PHONE OUTSIDE THE US	FAX	CONSULTANT Waseem	DATE March 28 2019
LAST NAME Olmsted		FIRST NAME Kendi		COMPANY NAME		
ADDRESS	CITY	STATE	COUNTRY	POSTAL CODE		
EMAIL ADDRESS KAA5812@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. 01/19	AUTH. CODE	ESTIMATE <input type="checkbox"/>	
QUANTITY	TITLE	ARTIST	DESCRIPTION	ART ID	PRICE	EXT
1	SANTORINI	PARK, SAM	Hand signed. Artwork is i...	G22598	\$7,500.00	\$7,500.00
SPECIAL INSTRUCTIONS <b>TO BE SHIPPED</b>					AMOUNT OF SALE	\$7,500.00
					TAX	\$0.00
					TOTAL SALE	\$7,500.00
					SHIPPING	\$0.00
					AMOUNT PAID	\$0.00
RECEIVED BY:					DATE: MARCH 28, 2019	BALANCE DUE \$7,500.00

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

THANK YOU