



CUSTOM FRAMING

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

INVOICE # 306

HOME PHONE		WORK PHONE		FAX	CONSULTANT		DATE September 15 2009	
LAST NAME test				FIRST NAME test				
ADDRESS								
CITY	STATE	COUNTRY	POSTAL CODE		EMAIL ADDRESS ruckerstev@hotmail.com			COMPANY NAME
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 WALK-IN	
CREDIT CARD #					EXP. 01/09	AUTH. CODE	DRIVER'S LICENSE #	
QUANTITY	TITLE	ARTIST	DESCRIPTION		PRODUCT ID		PRICE	EXT
1	TEST				0000		\$100.00	\$100.00
SPECIAL INSTRUCTIONS							AMOUNT OF SALE	\$100.00
							TAX	\$0.00
							TOTAL SALE	\$100.00
							SHIPPING	\$0.00
							AMOUNT PAID	\$0.00
RECEIVED BY:						DATE: SEPTEMBER 15, 2009	BALANCE DUE	\$100.00

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

THANK YOU