CUSTOM FRAMING INVOICE # 125



## **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		WORK PHONE			FAX			CONSULTANT			DATE			
954-222-	-2222	954-3	33-3333		9	954-555-5	555				Fe	ebruary 1	18 2009	
LAST NAME DOE					FIRST NAME John									
ADDRESS 123 Test Street Suite 100														
Fort Lauderdale STATE FL				COUNTRY United States				POSTAL CODE 33333-1234			email address steve@rekal.net			
FRAMING ORDER ✓ METHOD OF PAYMENT VISA/MC □ AMEX □ CHECK □ CASH □									ОТН	HER 🗆				
CREDIT CARD # 411111111111111111111111111111111111							EXP. 10/19	AUTH. C	ODE	DRIVER'S LICENSE	E#			
QUANTITY TITLE			,	ARTIST			DESCRIPTION				Р	RODUCT ID	PRICE	EXT
1				RITTO, HAND S MERO			IGNED AND NUMBER			ERED		G10287	\$4,000.00	\$4,000.00
SPECIAL INSTE	RUCTIONS					-							AMOUNT OF SALE	\$4,000.00
													TAX	\$200.00
													TOTAL SALE	\$4,200.00
													SHIPPING	\$300.00
													AMOUNT PAID	\$400.00
RECEIVED BY: DATE: FEBRUARY 18, 2009											BALANCE DUE	\$4,100.00		
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ALL CLAIMS AND RETURNED GOODS **MUST BE** ACCOMPANIED BY THIS INVOICE

THANK YOU