CUSTOM FRAMING INVOICE # 259



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 (215) 957-6467				WORK PHONE			FAX (CONSULTANT		August 1	August 13 2009				
LAST NAME Zeitz				FIRST NAME Carol												
ADDRESS The Villas	ADDRESS The Villas at Five Ponds 134 Fairway Drive															
		STATE PA	COUNTRY United S	states	3	POSTAL C 18974				cszeitz@comcast.net					COMPANY NAME	
METHOD OF PAYMENT VISA/MC □ AMEX □ CHECK □ CASH □ OTHER ☑													ORIGIN OTHER			
CREDIT CARD #							EXP. 01/09		AUTH. CODE	DRIV	ER'S LICENSE #					
QUANTITY	ANTITY TITLE AR			rist		DESCRIPTION				PRODUCT ID				PRICE		EXT
1			IMPI GIANC					tist.		G15879					\$200.00	\$200.00
SPECIAL INSTRUCTIONS Paid via paypal. A											AMOUNT OF SALE		\$200.00			
														T.	AX	\$0.00
														TOTA	L SALE	\$200.00
														SHIF	PING	\$0.00
														IUOMA	NT PAID	\$200.00
RECEIVED BY: DATE: AUGUS										ST 13, 2009		BALAN	CE DUE	\$0.00		

ALL CLAIMS AND RETURNED GOODS MUST BE ACCOMPANIED BY THIS INVOICE

THANK YOU