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INVOICE # A6564

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LAST NAME Sivek				FIRST NAME Karen				COMPANY NAME					
				THE VILLAGES				STATE COUN FL		TRY	90STAL COI 32163	POSTAL CODE 32163	
EMAIL ADDRESS karen.sivek@verizon.net				WEBSITE ETSY				DRIVER'S LICENSE #					
METHOD OF PAYMENT VISA/MC AMEX CHECK CASH OTHER											ORIGIN		
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QUANTITY	TITLE	ARTIS	ST.	DI	ESCRIPT	ION	ART ID				PRICE		EXT
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ALL CLAIMS AND RETURNED GOODS MUST BE ACCOMPANIED BY THIS INVOICE

THANK YOU