



# INVOICE # A4860

HOME PHONE (416) 305-2736	BUSINESS PHONE	CELL PHONE	PHONE OUTSIDE THE US	FAX	CONSULTANT Jeremiah Heller	DATE March 17 2017
LAST NAME Dadouch		FIRST NAME Aaron		COMPANY NAME		
ADDRESS 40 Broad St Apt 15c			CITY NY	STATE NY	COUNTRY USA	POSTAL CODE 10004
EMAIL ADDRESS dadouchaaron@gmail.com			WEBSITE GallArt.com		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 HOUSE
CREDIT CARD # XXXX-XXXX-XXXX-			EXP. 01/17	AUTH. CODE	ESTIMATE <input type="checkbox"/>	
QUANTITY	TITLE	ARTIST	DESCRIPTION	ART ID	PRICE	EXT
1	KING OF ROCK	MR. BRAINWASH	Matching Dyptic 14 50	0000	\$1,500.00	\$1,500.00
1	KING OF ROCK	MR. BRAINWASH	Pre-Order Fee 25%	0000	\$350.00	\$350.00
1	KING OF ROCK	MR. BRAINWASH	Shipping Fee	0000	\$150.00	\$150.00
SPECIAL INSTRUCTIONS <b>TO BE SHIPPED</b>					AMOUNT OF SALE	\$2,000.00
					TAX	\$0.00
					TOTAL SALE	\$2,000.00
					SHIPPING	\$100.00
					AMOUNT PAID	\$0.00
RECEIVED BY:				DATE: MARCH 17, 2017	BALANCE DUE	\$2,100.00

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

THANK YOU