



# INVOICE # A5254

HOME PHONE (305) 445-6090	BUSINESS PHONE	CELL PHONE (786) 899-1967	PHONE OUTSIDE THE US	FAX	CONSULTANT KEN	DATE November 17 2017
LAST NAME		FIRST NAME		COMPANY NAME Grove Fine Art LLC		
ADDRESS 3444 Main St #20		CITY Miami	STATE FL	COUNTRY USA	POSTAL CODE 33133	
EMAIL ADDRESS castledesigns1@me.com		WEBSITE			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
CREDIT CARD # XXXX-XXXX-XXXX-			EXP. 01/17	AUTH. CODE	ESTIMATE <input type="checkbox"/>	
QUANTITY	TITLE	ARTIST	DESCRIPTION	ART ID	PRICE	EXT
1	FLOWER THROWER	MR BRAINWASH	44 x 44" original on paper - includes custom frame	0000	\$10,750.00	\$10,750.00
SPECIAL INSTRUCTIONS Terms of Payment: Check White Shadow Box -FC Spacer floating on 4" white matting all the way around					AMOUNT OF SALE	\$10,750.00
					TAX	\$0.00
					TOTAL SALE	\$10,750.00
					SHIPPING	\$0.00
					AMOUNT PAID	\$5,000.00
RECEIVED BY:					DATE: NOVEMBER 17, 2017	BALANCE DUE \$5,750.00

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

THANK YOU