CUSTOM FRAMING INVOICE # 186



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				June 18 2009			
LAST NAME Rucker				Steve	FIRST NAME Steve								
ADDRESS 8008 Lakepointe Drive													
Plantation STATE FL		STATE FL	COUNTRY United States		POSTAL CODE 33322	ruckers		^{DRESS} rstev@hotmail.com				COMPANY NAME	
METHOD OF PAYMENT VISA/MC AMEX □ CHECK □ CASH □ OTHER □											ORIGIN		
CREDIT CARD # 5466160256649680 EXP. 10/12								AUTH. CODE	DRIVE	ER'S LICENSE#	:NSE#		
QUANTITY	ŢI	TLE	ARTIST		DESCRIPTION		1	PRODUCT ID		PRICE		EXT	
1	TEST							0000			\$100.00		\$100.00
SPECIAL INSTRUCTIONS									AMOUNT OF SALE		\$100.00		
										TAX		\$0.00	
											TOTAL SALE		\$100.00
											SHIPPING		\$0.00
											AMOUN	IT PAID	\$0.00
RECEIVED BY: DATE: JUNE 18, 2009										BALANCE DUE		\$100.00	

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

THANK YOU