

Proforma Invoice

**From Address:**

www.lidalineacompletachile.cl
Santiago
Región Metropolitana, SANTIAGO
CENTRO, 8320000
Chile
+56 9 93251195

Proforma Invoice no: 13899

Proforma Invoice date: 10/05/2020

Order No: 13899

Date: 10/05/2020

Email: gallardo.vane@gmail.com

Tel: 990340214

Shipping Method: Región Metropolitana

Billing Address:

vanessa gallardo soto
almirante pastene 70 depto 609
santiago, PROVIDENCIA
Chile

Shipping Address:

CL317

Image	SKU	Product	Quantity	Price	Total Price
	dt002	SLIMMER EXTREME	1	\$25.000	\$25.000
Subtotal					\$25.000
Envío					\$3.000 vía Región Metropolitana
Método de pago					Flow webpay
Total					\$28.000