



INVOICE # A17327

HOME PHONE	BUSINESS PHONE	CELL PHONE (416) 894-0678	PHONE OUTSIDE THE US	FAX	CONSULTANT	DATE April 28 2023
LAST NAME Eliav		FIRST NAME Aaron		COMPANY NAME		
ADDRESS	CITY	STATE	COUNTRY	POSTAL CODE		
EMAIL ADDRESS dr.jasmineeliav@gmail.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 OTHER
CREDIT CARD # XXXX-XXXX-XXXX-			EXP. 01/23	AUTH. CODE	ESTIMATE <input type="checkbox"/>	
QUANTITY	TITLE	ARTIST	DESCRIPTION	ART ID	PRICE	EXT
1	TIKVA	INDIANA, ROBERT	Hand signed, dated and nu...	G26253	\$10,000.00	\$10,000.00
SPECIAL INSTRUCTIONS TERMS OF PAYMENT: BANK WIRE					AMOUNT OF SALE	\$10,000.00
					TAX	\$0.00
					TOTAL SALE	\$10,000.00
					SHIPPING	\$0.00
					AMOUNT PAID	\$0.00
RECEIVED BY:					DATE: APRIL 28, 2023	BALANCE DUE \$10,000.00

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

THANK YOU