



GALLERY ART

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INVOICE # 474

HOME PHONE 416-413-7770		CELL PHONE	FAX	CONSULTANT MOOD mood@gallart.com		DATE February 01 2010	
LAST NAME LAIKEN			FIRST NAME ADAM				
ADDRESS 99 Avenue Road, Suite 307							
CITY Toronto	STATE Ontario	COUNTRY CANADA	POSTAL CODE M5R 2G5	EMAIL ADDRESS elana.laiken@hotmail.com			COMPANY NAME
METHOD OF PAYMENT VISA/MC <input checked="" type="checkbox"/> AMEX <input type="checkbox"/> CHECK <input type="checkbox"/> CASH <input type="checkbox"/> OTHER <input type="checkbox"/>						ORIGIN OTHER	
CREDIT CARD # *****6025				EXP. 11/11	AUTH. CODE ***	DRIVER'S LICENSE #	
QUANTITY	TITLE	ARTIST	DESCRIPTION	PRODUCT ID		PRICE	EXT
1	MOBILITY WITHIN	AGAM, YAACOV	Hand signed and numbered ...	G16209		\$1,299.00	\$1,299.00
1	BLK W/ GOLD LIP	AGAM	GEOMETRIC	0000	FRAMING	\$181.00	\$181.00
SPECIAL INSTRUCTIONS SHIP TO CLIENT AT ABOVE ADDRESS VIA UPS GROUND, MAIL CERTIFICATE AND APPRAISAL TO CLIENT TO BE SHIPPED						AMOUNT OF SALE	\$1,480.00
						TAX	\$0.00
						TOTAL SALE	\$1,480.00
						SHIPPING	\$136.38
						AMOUNT PAID	\$1,616.38
RECEIVED BY:						DATE: FEBRUARY 01, 2010	BALANCE DUE \$0.00

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

THANK YOU