305.932.6166 20633 Biscayne Blvd Aventura FL 33180 GALLART.COM

INVOICE # A6800

HOME PHONE			(570) 7	TPHONE 70) 758-2516		PHONE OUTSIDE THE US		FAX		CONSULTANT		September 24 2020		
						rst name Iarilyn D.				COMPAN	Y NAME			
ADDRESS 4918 State Route 225						Dornsife			STATE PA		COUNTRY		POSTAL CODE 17823	
email address marilyn3534@hotmail.com												DRIVER'S LICENSE#		
METHOD OF PAYMENT VISA/MC ☑ AMEX ☐ CHECK ☐ CASH ☐ OTHER ☐												ORIGIN		
CREDIT CARD # XXXX-XXXX-XXXX-							01/20	AUT	AUTH. CODE ESTIM		ESTIMA	ATE		
QUANTITY	TITLE ARTIST				DESCRIPTION			ART ID		PRICE		EXT		
1	WEST E CAF		MAIMON	I, ISAAC		l signed a ered	nd G1		G11163				\$750.00	\$750.00
	SPECIAL INSTRUCTIONS FOTAL BALANCE INCLUDES ARTWORK, PROFESSIONALLY PACKAGED AND DOOR TO DOOR DELIVERY.												AMOUNT OF SALE	
												TA	X	\$0.00
												TOTAL SALE		\$750.00
												SHIPI	PING	\$0.00
												AMOUN	T PAID	\$750.00
RECEIVED BY: DATE: SEP										: SEPTEMBER 24, 2020			BALANCE DUE	

ALL CLAIMS AND RETURNED GOODS MUST BE ACCOMPANIED BY THIS INVOICE

THANK YOU