305.932.6166 20633 Biscayne Blvd Aventura FL 33180 GALLART.COM

## **INVOICE # A4588**

HOME PHONE		BUSINESS	PHONE	CELL PH	ONE	PHONE	E OUTSIDE TH	IE US	FAX			CONSULT		Augus	st 12 2016
LAST NAME MILLS					FIRST NAME Kevin			COM			NAME				
ADDRESS CITY			STA	STATE			COUNTRY			POST	POSTAL CODE				
EMAIL ADDRESS Larrabeekm@yahoo.com													DRIVER'S LICENSE#		
METHOD OF PAYMENT VISA/MC AMEX CHECK CASH OTHER													ORIGIN		
CREDIT CARD # XXXX-XXXX-								6	AUTH. CO	DE		ESTIM	ATE		
QUANTITY	UANTITY TITLE		ARTIST		D	DESCRIP			AR	ΓID			PRICE		EXT
1	APOCALYPSE IV		HARING, KEITH			Hand signed a numbered		and		G16697			\$8,50	0.00	\$8,500.00
TERMS OF P	SPECIAL INSTRUCTIONS TERMS OF PAYMENT: WIRE INCLUDES BLACK, GALLERY FRAME TO FIT WILL BE PROFESSIONALLY PACKAGED AND DOOR TO DOOR														\$8,500.00
DELIVERY INCLUDED. INVOICE VALID FOR 5 BUSINESS DAYS OR UNTIL BALANCE HAS BEEN PAID IN FULL.													TAX		\$0.00
													TOTAL SAL	.E	\$8,500.00
													SHIPPING	;	\$0.00
													AMOUNT PA	AID	\$0.00
RECEIVED	RECEIVED BY: DATE: AUGUST 12, 2016													UE	\$8,500.00

ALL CLAIMS AND RETURNED GOODS MUST BE ACCOMPANIED BY THIS INVOICE

THANK YOU