305.932.6166 20633 Biscayne Blvd Aventura FL 33180 GALLART.COM

INVOICE # A4617

HOME PHONE		BUSINESS P	HONE	(520)	ONE 955-5124	PHONE OU	TSIDE THE US	FA)	FAX CONSUL Lexy		exy			September 04 2016			
LAST NAME Jalbout			FIRST NAME Abraham				COMPANY NAME										
ADDRESS 1600 N W	/ilmot Unit	195			n	n ST		COUNT				POSTAL CODE 85712					
email address drajalbout@gmail.com													DRIVER'S LICENSE#				
METHOD OF PAYMENT VISA/MC ☑ AMEX □ CHECK □ CASH □ OTHER □													ORIGIN				
CREDIT CARD # XXXX-XXXX-XXXX- EXI 0'								AUTH	AUTH. CODE ESTIM			ESTIMA	ATE				
QUANTITY	TITL	E ARTIST			DI	DESCRIPTIO			ART ID					PRICE		EXT	
1		SOLUT BRITTO, RITTO ROMERO				Hand Signed and Numbered			G26307					\$2,15	50.00	\$2,150.00	
SPECIAL INSTRUCTIONS TERMS OF PAYMENT: VISA INITIAL DEPOSIT OF \$500 PAID 9/4/16 REMAINING BALANCE WILL BE PAID OVER A 4 MONTH PERIOD													AMOUNT OF SALE		\$2,150.00		
WITH MONTHLY PAYMENTS OF \$412.5. NEXT PAYMENT DUE 10/04/16. *TOTAL BALANCE INCLUDE PACKAGING & SHIPPING.													TAX			\$0.00	
TO BE SHIPPED													TOTAL SA		LE	\$2,150.00	
													SHIPPING		G	\$0.00	
													AMC	DUNT P	AID	\$500.00	
RECEIVED BY: DATE: SEPTEMBER 04, 2010										2016	BALANCE DUE			\$1,650.00			

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

THANK YOU