305.932.6166 20633 Biscayne Blvd Aventura FL 33180 GALLART.COM

## **INVOICE # A4562**

| HOME PHONE   | PHONE BUSINESS PHONE  |  | HONE | CELL PHONE (917) 750-5      |                    |                   | ONE OU | TSIDE THE US | F           | FAX                           |     | CONSULTANT           |                       |            | July 23 2016 |             |  |
|--|---|--|------|-----------------------------|--------------------|-------------------|--------|--------------|-------------|-------------------------------|-----|----------------------|-----------------------|------------|--------------|-------------|--|
| LAST NAME<br>Wayne   |   |  |      |                             | FIRST NAME<br>Gary |                   |        |              |             | COMPANY NAME Spirit Art Group |     |                      |                       |            |              |             |  |
| ADDRESS CITY Edgewater   |   |  |      |                             |                    | STA<br><b>N</b> J |        |              | COUNTRY USA |                               |     | POSTAL CODE<br>07020 |                       |            |              |             |  |
| EMAIL ADDRESS spirit.studios.llc@gmail.com  WEBSITE  |   |  |      |                             |                    |                   |        |              |             |                               |     |                      | DRIVER'S LICENSE#     |            |              |             |  |
| METHOD OF PAYMENT VISA/MC □ AMEX □ CHECK □ CASH □ OTHER ☑  |   |  |      |                             |                    |                   |        |              |             |                               |     |                      |                       | ORIGIN     |              |             |  |
| CREDIT CARD #  XXXX-XXXX-XXXX-   EXP.  01/16   |   |  |      |                             |                    |                   |        |              |             |                               | EST | IMATE                |                       |            |              |             |  |
| QUANTITY   | Y TITLE ARTIST  |  |      | IST                         | DESCRIPTI          |                   |        | ION          | ART ID      |                               |     |                      |                       | PRICE      |              | EXT         |  |
| 1  | HELIOTHERAPY INDIANA,<br>LOVE ROBERT  |  |      | HAND SIGNED<br>NUMBERED, AI |                    |                   |        |              |             |                               |     |                      | \$12,000.             | 00         | \$12,000.00  |             |  |
| SPECIAL INSTRUCTIONS<br>TERMS OF PAYMENT: BANK WIRE ONCE PAYMENT HAS BEEN RECEIVED IN FULL, ARTWORK WILL BE PICKED UP FROM THE |   |  |      |                             |                    |                   |        |              |             |                               |     |                      | AMO                   | OUNT OF SA | LE           | \$12,000.00 |  |
|  | WAREHOUSE ONCE KEN RETURNS ON MONDAY, AUGUST 1ST. ARTWORK WILL BE PROFESSIONALLY PACKAGED AND STANDARD<br>DVERNIGHTED. *CONFIRM SHIPPING ADDRESS. INVOICE VALID FOR 5 BUSINESS DAYS OR UNTIL BALANCE HAS BEEN PAID IN FULL. |  |      |                             |                    |                   |        |              |             |                               |     |                      |                       | TAX        |              | \$0.00      |  |
|  |   |  |      |                             |                    |                   |        |              |             |                               |     | 7                    | FOTAL SALE \$12,000.0 |            | \$12,000.00  |             |  |
|  |   |  |      |                             |                    |                   |        |              |             |                               |     |                      |                       | SHIPPING   |              | \$0.00      |  |
|  |   |  |      |                             |                    |                   |        |              |             |                               |     |                      | Α                     | MOUNT PAIL | 7            | \$0.00      |  |
| RECEIVED BY: DATE: JULY 23, 2016   |   |  |      |                             |                    |                   |        |              |             |                               |     | В                    | BALANCE DUE \$12      |            | \$12,000.00  |             |  |

ALL CLAIMS AND RETURNED GOODS MUST BE ACCOMPANIED BY THIS INVOICE

THANK YOU