305.932.6166 20633 Biscayne Blvd Aventura FL 33180 GALLART.COM

INVOICE # A17410

HOME PHONE BUSINESS		BUSINESS I	(77			PHONE (PHONE OUTSIDE THE US		FAX		CONSULTANT		June 05 2023	
LAST NAME Spivak					FIRST NAME Faina		COMPANY NAME							
ADDRESS CITY S				ST	rate .	COUNTRY			POSTA	AL CODE				
EMAIL ADDRESS faina.spivak@vitrahealth.com											DRIVER'S LICENSE #			
METHOD OF PAYMENT VISA/MC AMEX CHECK CASH OTHER												ORIGIN OTHER		
CREDIT CARD # XXXX-XXXX-XXXX- EXP. 01/23 AUTH. CODE ESTIMATE														
QUANTITY TITLE ARTIST DESCRI							SCRIPTION		ART	ID		PRICE		EXT
1	FLOWER SUNDA MORN	AY B.	WARHO	L, AN	DY This is	s a fill	in your o	w	G125	511		\$750.0	00	\$750.00
1	WHITE F	RAME			rush				000	0	FRAMINO	\$476.3	36	\$476.36
SPECIAL INSTRI	UCTIONS											AMOUN OF SAL	T E	\$1,226.36
												TAX		\$85.85
												TOTAL SALE		\$1,312.21
												SHIPPIN	G	\$0.00
												AMOUN PAID	Т	\$0.00
RECEIVED BY: DATE: JUNE 05, 2023											BALANC DUE	E	\$1,312.21	

ALL CLAIMS AND RETURNED GOODS MUST BE ACCOMPANIED BY THIS INVOICE

THANK YOU