305.932.6166 20633 Biscayne Blvd Aventura FL 33180 GALLART.COM

INVOICE # 572

номе рноме 954-222-2222		BUSINESS PHONE 954-333-3333		CELL PHONE 954-444-4444		ļ	FAX		CONSULTANT		ANT		^{DATE} May 31 20	_{АТЕ} Мау 31 2010		
LAST NAME XXXDoe					FIRST NAME John			COM			NAME					
ADDRESS	DDRESS CITY ST.				TE		COUNTRY				POSTA	L CODE				
EMAIL ADDRESS XXX@rekal.net						www.ichameleongroup.com							DRIVER'	DRIVER'S LICENSE #		
METHOD OF PAYMENT VISA/MC AMEX CHECK CASH OTHER												ORIGI	ORIGIN			
CREDIT CARD #								XP. 01/10	AUTH. CO	DE		ESTIM.	ATE			
QUANTITY	TITLE		ARTIST	Γ		DESC	RIPTIO	TION PRODI		UCT ID			PI	RICE	EXT	
1	TEST		TEST		te	st			00	00				\$200.00	\$200.00	
SPECIAL INSTRU	ICTIONS												AMOUN [*]	T OF SALE	\$200.00	
													Т	AX	\$0.00	
													TOTA	L SALE	\$200.00	
													SHIF	PPING	\$0.00	
													AMOU	NT PAID	\$0.00	
RECEIVED BY: DATE: MAY 31, 2010											BALAN	BALANCE DUE				

ALL CLAIMS AND RETURNED GOODS MUST BE ACCOMPANIED BY THIS INVOICE

THANK YOU