305.932.6166 20633 Biscayne Blvd Aventura FL 33180 GALLART.COM

INVOICE # A13539

HOME PHONE			(713)	ONE 302-5133	PHONE OL	PHONE OUTSIDE THE US		FAX			CONSULTA Lexy		January 11 2		
Griffiths		FIRST NAME Peter		COMPAN		PANY NAME									
ADDRESS 2509 Bloo	dgett St	Houston		TX		COUNTRY			77004	Ē					
EMAIL ADDRESS p_griffiths@bellsouth.net											DRIVER'S LICENSE #				
METHOD OF PAYMENT VISA/MC AMEX CHECK CASH OTHER												ORIGIN	ORIGIN		
CREDIT CARD #					AUTH. CODE		ESTIMA	TE							
QUANTITY	UANTITY TITLE ARTIST			DESCRIPTION			ART ID				PRICE		EXT		
1	ASTF	RA Er	te, Romair	Incised the	ncised signatuı ıe		G161		123			\$4,00	00.00	\$4,000.00	
Terms of Payr	SPECIAL INSTRUCTIONS Terms of Payment: Bank Wire Total balance includes artwork, professionally packaged and shipped. Invoice valid for 7 business days or until													\$4,000.00	
balance paid in full												TAX		\$0.00	
												TOTAL SA	LE	\$4,000.00	
												SHIPPING	G	\$250.00	
												AMOUNT P	AID	\$0.00	
RECEIVED BY: DATE: JANUARY 11, 2022											BALANCE [DUE	\$4,250.00		

ALL CLAIMS AND RETURNED GOODS MUST BE ACCOMPANIED BY THIS INVOICE

THANK YOU