305.932.6166 20633 Biscayne Blvd Aventura FL 33180 GALLART.COM

## **INVOICE # 2036**

HOME PHONE 416-733-			CELL PHONE 416-733-7727		FAX			MOOD CONY			RS April 19 2013		
LAST NAME LAIKEN				ME <b>JE</b>	COI		COMPA	ANY NAME					
ADDRESS 11 William Carson Crescent, Suite 622						TORONTO			CANADA			POSTAL CODE M2P 2G1	
EMAIL ADDRESS stan.laiken@sympatico.ca											DRIVER'S LICENSE #		
METHOD OF PAYMENT  VISA/MC □ AMEX □ CHECK □ CASH □ OTHER ☑									ORIGIN				
CREDIT CARD #					EXP. 01/13	AUTH. CODE	CODE						
QUANTITY	TITLE ARTIST DESCRIPT			ION	PRODUCT ID			PRICE		EXT			
1	THE STUDIO A	AT CHAGALL, MARC		igned and nui pe	mbered	G22217				\$8	3,200.00	\$8,200.00	
SPECIAL INSTRUCTIONS PACK AND SHIP PER CLIENT'S INSTRUCTIONS TO ABOVE ADDRESS  AI										MOUNT OF SALE		\$8,200.00	
TO BE SHIPPED										TAX		\$0.00	
										TOTAL	SALE	\$8,200.00	
										SHIP	PING	\$248.00	
										AMOUN	T PAID	\$0.00	
RECEIVED BY: DATE: APRIL 19, 2013									BALANCE DUE		\$8,448.00		
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ALL CLAIMS AND RETURNED GOODS **MUST BE** ACCOMPANIED BY THIS INVOICE

THANK YOU