305.932.6166 20633 Biscayne Blvd Aventura FL 33180 GALLART.COM

## **INVOICE # A6307**

HOME PHONE (917) 270-1094		BUSINESS PHONE		CELL PHONE			PHONE OL	JTSIDE THE US	FAX			CONSULTANT Lexy			November 08 2019	
Dorfman First Name Stever											Y NAME					
ADDRESS 28 Old Fulton Street						Brooklyn			STAT	COUNTRY			1120			
email address sdorfman@dorfmanorganization.com							WEBSITE DRIV							VER'S LICENSE #		
METHOD OF PAYMENT VISA/MC AMEX CHECK CASH OTHER														ORIGIN		
CREDIT CARD # XXXX-XXXX-XXXX-								ESTIMATE STIMATE		E						
QUANTITY TITLE ARTIST						DESCRIPTION			AR	RT ID				PRICE	EXT	
1	HOMAG DAL					and si mber	igned a ed	nd	G24	1342			,	\$500.00	\$500.00	
1	CM46 <sup>2</sup>					Gold, Floating Frame ncludes stretch			00	00	FRAMING			,	\$250.00	\$250.00
TERMS OF P	SPECIAL INSTRUCTIONS TERMS OF PAYMENT: BANK WIRE OR CHECK TOTAL BALANCE INCLUDES ARTWORK PROFESSIONALLY PACKAGED AND SHIPPED. INVOICE VALID FOR 5 BUSINESS DAYS OR UNTIL BALANCE HAS BEEN PAID IN FULL.														AMOUNT OF SALE	\$750.00
														L	TAX	\$0.00
															TOTAL SALE	\$750.00
															SHIPPING	\$100.00
															AMOUNT PAID	\$0.00
RECEIVED	BY:									DATE: N	IOVEMB	ER 08, 20	19	E	BALANCE DUE	\$850.00

ALL CLAIMS AND RETURNED GOODS MUST BE ACCOMPANIED BY THIS INVOICE

THANK YOU