305.932.6166 20633 Biscayne Blvd Aventura FL 33180 GALLART.COM

INVOICE # A3877

номе рноме (540) 379	PHONE BUSINESS PHONE CELL 379-4425			CELL PI	L PHONE		PHONE OUTSIDE THE I		THE US	FAX	consulta Wasee			I		
Schmitt		FIRST NAME Michael						COMPANY NAME								
					CITY Stafford			VA STATE			COUNTRY		POSTAL CODE 22554			
EMAIL ADDRESS mike@providicamedical.com WEBSITE													DRIVER'S LI	DRIVER'S LICENSE#		
METHOD OF PAYMENT VISA/MC □ AMEX ☑ CHECK □ CASH □ OTHER □													ORIGIN OTHE	OTHER		
CREDIT CARD # XXXX-XXXX- EXP. 01/15											ESTIMA	TE				
QUANTITY	UANTITY TITLE ARTIST				DESCRIPTI			ON	PRODU		CT ID			PRICE		EXT
1	ASCEN ANG	-	MAX, F (199		R Ha Stu		gned or	n fro	ont;	G267	718			\$6,2	00.00	\$6,200.00
Mr Schmitt, thank you for your purchase. Please visit GallArt.com for our complete inventory of Peter Max. Please let me know if I can be of any													AMOUNT OF	SALE	\$6,200.00	
further assistance. Regards, Waseem TO BE SHIPPED													TAX		\$0.00	
TO BE SHIFFED														TOTAL SA	ALE	\$6,200.00
														SHIPPIN	IG	\$0.00
														AMOUNT F	PAID	\$6,200.00
RECEIVED	RECEIVED BY: DATE: JULY 21, 2015													BALANCE	DUE	\$0.00

ALL CLAIMS AND RETURNED GOODS MUST BE ACCOMPANIED BY THIS INVOICE

THANK YOU