305.932.6166 20633 Biscayne Blvd Aventura FL 33180 GALLART.COM

## **INVOICE # A4700**

| HOME PHONE                                  | BUSINESS PHONE CELL PHO (786)  |             | ONE<br>501-3757 |             | PHONE OUTSIDE THE US |                | 6    | FAX                |                      | CONSUL<br>AMY | CONSULTANT<br>AMY |      | November 12<br>2016 |          |                |          |  |  |
|---|--|-------------|-----------------|-------------|----------------------|----------------|------|--------------------|----------------------|---------------|-------------------|------|---------------------|----------|----------------|----------|--|--|
| LAST NAME<br>Lopez                          | FIRST NAME<br>Reynaldo   |             |                 |             |                      | COMPANY NAME   |      |                    |                      |               |                   |      |                     |          |                |          |  |  |
| ADDRESS<br>15836 S                          | W 61 Stree   | сіту<br>Міа |                 | STATE<br>FL |                      | COUNTRY<br>USA |      |                    | POSTAL CODE<br>33193 |               |                   |      |                     |          |                |          |  |  |
| email address doctor80@hotmail.com          |  |             |                 |             |                      |                |      |                    |                      |               |                   |      | DRIVER'S LICENSE #  |          |                |          |  |  |
|   | METHOD OF PAYMENT  VISA/MC AMEX CHECK CASH OTHER   |             |                 |             |                      |                |      |                    |                      |               |                   |      |                     |          | ORIGIN         |          |  |  |
| CREDIT CARD #  XXXX-XXXX-XXXX-  EXP.  01/16 |  |             |                 |             |                      |                |      |                    |                      |               |                   | MATE |                     |          |                |          |  |  |
| QUANTITY                                    | Y TITLE ARTIST   |             |                 |             | SCRIPT               | ION            | DN A |                    |                      |               |                   | PRIC | E                   | EXT      |                |          |  |  |
| 1   | WOM<br>PLAYING   |             | CHARL           | ES LE       |                      |                |      | vas hand<br>nbered |                      | 0000          |                   |      |                     | (        | 00.008         | \$800.00 |  |  |
|   | PECIAL INSTRUCTIONS<br>ICLUDES NEW FRAME OUTER FRAME IS CM3480813 & INNER FRAME CM3480925 AND KEEP BLACK LINEN |             |                 |             |                      |                |      |                    |                      |               |                   |      |                     |          | AMOUNT OF SALE |          |  |  |
|   |  |             |                 |             |                      |                |      |                    |                      |               |                   |      |                     | TAX      |                | \$56.00  |  |  |
|   |  |             |                 |             |                      |                |      |                    |                      |               |                   |      |                     |          | TOTAL SALE     |          |  |  |
|   |  |             |                 |             |                      |                |      |                    |                      |               |                   |      |                     |          | SHIPPING       |          |  |  |
|   |  |             |                 |             |                      |                |      |                    |                      |               |                   |      |                     | AMOUNT   | PAID           | \$456.00 |  |  |
| RECEIVED BY: DATE: NOVEMBER 12, 2016        |  |             |                 |             |                      |                |      |                    |                      |               |                   |      | BALANCE             | \$400.00 |                |          |  |  |

ALL CLAIMS AND RETURNED GOODS **MUST BE** ACCOMPANIED BY THIS INVOICE

THANK YOU