



INVOICE # A5311

HOME PHONE	BUSINESS PHONE	CELL PHONE (786) 239-9347	PHONE OUTSIDE THE US	FAX	CONSULTANT Lexy	DATE December 11 2017
LAST NAME Baptista		FIRST NAME Henrique		COMPANY NAME		
ADDRESS 1900 N Bay Shore Dr		CITY Miami	STATE FL	COUNTRY USA	POSTAL CODE 33132	
EMAIL ADDRESS henriquebaptista@live.co.uk		WEBSITE			DRIVER'S LICENSE #	
METHOD OF PAYMENT VISA/MC <input checked="" type="checkbox"/> AMEX <input type="checkbox"/> CHECK <input type="checkbox"/> CASH <input type="checkbox"/> OTHER <input type="checkbox"/>					ORIGIN	
CREDIT CARD # XXXX-XXXX-XXXX-			EXP. 01/17	AUTH. CODE	ESTIMATE <input type="checkbox"/>	
QUANTITY	TITLE	ARTIST	DESCRIPTION	ART ID	PRICE	EXT
1	COMPANION	KAWS		0000	\$450.00	\$450.00
SPECIAL INSTRUCTIONS It was a pleasure meeting you at Spectrum Miami. Congratulations on your purchase! Do not hesitate to contact me if at Lexy@GallArt.com if I can be of any further assistance.					AMOUNT OF SALE	\$450.00
					TAX	\$31.50
					TOTAL SALE	\$481.50
					SHIPPING	\$0.00
					AMOUNT PAID	\$481.50
RECEIVED BY:				DATE: DECEMBER 11, 2017	BALANCE DUE	\$0.00

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

THANK YOU