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INVOICE # A11457

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LAST NAME Balboa				FIRST NAME Michael				C	OMPAN	Y NAME						
ADDRESS 35 fairway court				Voc	orheesville				STATE		COUNTRY			POSTAL CODE 12186		
EMAIL ADDRESS Michael.balboa@artsy.net					ARTSY								DRIVER'S LICENSE #			
METHOD OF PAYMENT VISA/MC AMEX CHECK CASH OTHER												ORIGIN				
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QUANTITY	NTITY TITLE ART			ST	DI	SCRIPTION		ART ID					Р	RICE	EXT	
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ALL CLAIMS AND RETURNED GOODS MUST BE ACCOMPANIED BY THIS INVOICE

THANK YOU