305.932.6166 20633 Biscayne Blvd Aventura FL 33180 GALLART.COM

## **INVOICE # A4260**

HOME PHONE	ME PHONE BUSINESS				HONE ) 995-252		ONE OUTSIDE THE US		FAX	FAX		CONSULTAN	F	February 05 2016	
Read			FIRST NAME Rory					COMPAN	COMPANY NAME						
ADDRESS CITY				ST	STATE			COUNTRY			POSTAL CODE				
email.address roryread777@gmail.com													DRIVER'S LICENSE#		
METHOD OF PAYMENT  VISA/MC □ AMEX □ CHECK □ CASH □ OTHER ☑													ORIGIN		
CREDIT CARD#  XXXX-XXXX-XXXX-  EXP. 01/16										ESTIMAT	E				
QUANTITY	NTITY TITLE		ART	ARTIST		DESCRIP		ION	AR	T ID			PRICE		EXT
1	1 COPEAUX DE SPIRALES		CALDER ALEXAND				gned and ed		G25331				\$3,50	0.00	\$3,500.00
TERMS OF PA	SPECIAL INSTRUCTIONS TERMS OF PAYMENT: BANK WIRE SHIPPING COST TO BE DETERMINE. PLEASE PROVIDE SHIPPING ADDRESS. INVOICE VALID FOR 7													SALE	\$3,500.00
BUSINESS DA	BUSINESS DAYS OR UNTIL BALANCE HAS BEEN PAID IN FULL.														\$0.00
													TOTAL SAL	.E	\$3,500.00
													SHIPPING		\$0.00
													AMOUNT PA	ND	\$0.00
RECEIVED	RECEIVED BY: DATE: FEBRUARY 05, 2016												BALANCE D	UE	\$3,500.00

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

THANK YOU