305.932.6166 20633 Biscayne Blvd Aventura FL 33180 GALLART.COM

INVOICE # A4895

| (305) 445 | PHONE BUSINESS PHONE CELL | | CELL PI | PHONE | | PHONE OUTSIDE THE U | | S | FAX | | CONSULTANT | | | April 12 2017 | | | |
|---|---------------------------|--------|---------|-------|---------------------|---------------------|---------|---------------|-----|-----------------------------|---------------|-------|------|----------------------|----|-------------|--|
| LAST NAME ROBERTS | | | | | | | | | | OMPANY NAME IA GALLERIES | | | | | | | |
| | | | | | сітү Miami Beach | | | | | STATE FL | COUNTRY | | | POSTAL CODE 33140 | | | |
| castledes | s igns1@ma | ac.com | WEBSITE | | | | | | | D | RIVER'S LICEN | ISE# | | | | | |
| METHOD OF PAYMENT VISA/MC AMEX CHECK CASH OTHER | | | | | | | | | | | | | | ORIGIN | | | |
| CREDIT CARD # XXXX-XXXX-XXXX- | | | | | | | | EXP. 01/17 | AU | TH. CODE | | ESTIN | IATE | | | | |
| QUANTITY | TY TITLE ARTIST | | | IST | DESCRIPTION | | | ION | | ART ID | | | | PRICE | | EXT | |
| 1 | MANHA | TTAN | NEIMAN | , LER | | and si | igned a | nd dated | t | G28311 | | | Ç | \$49,000. | 00 | \$49,000.00 | |
| SPECIAL INSTRUCTIONS TERMS OF PAYMENT: CHECK | | | | | | | | | | | | | AMOL | JNT OF SA | LE | \$49,000.00 | |
| | | | | | | | | | | | | | | TAX | | \$0.00 | |
| | | | | | | | | | | | | | ТО | TAL SALE | | \$49,000.00 | |
| | | | | | | | | | | | | | S | HIPPING | | \$0.00 | |
| | | | | | | | | | | | | | AM | OUNT PAII | | \$49,000.00 | |
| RECEIVED BY: | | | | | | | | | | DATE: APRIL 12, 2017 | | | | ANCE DU | E | \$0.00 | |

ALL CLAIMS AND RETURNED GOODS MUST BE ACCOMPANIED BY THIS INVOICE

THANK YOU