305.932.6166 20633 Biscayne Blvd Aventura FL 33180 GALLART.COM

INVOICE # 2947

HOME PHONE 49026619190		SINESS PHONE		CELL PHONE		FAX		CONSULTANT KEN		April	10 2014	
LAST NAME Lebek							COMP	ANY NAME				
ADDRESS Kirburger Str. 1 CITY Bad Ma			ienbe	erg							POSTAL CODE 56470	
EMAIL ADDRESS barbara.lebek@lebek.de				WEBSITE					DRIVER'S LICEN	SE#		
METHOD OF PAYMENT VISA/MC AMEX CHECK CASH OTHER										ORIGIN		
CREDIT CARD #						AUTH. CODE	CODE		ESTIMATI	E		
UANTITY TITLE ARTIST				DESCRIPT	PRODUCT ID				PRICE	EXT		
INTERIOR WIT	H LICH	LICHTENSTEIN ROY			Castelli	G25567				\$39,500.00	\$39,500.00	
BLONDE (SURREALIST SERIES)		LICHTENSTEIN, ROY			ered, and	G19217				\$59,500.00	\$59,500.00	
HOPE (B/W)		INDIANA, ROBERT				0000				\$100,000.00	\$100,000.00	
POP SHOP III (1) HAR	HARING, KEITH			lated	G119	01			\$10,000.00	\$10,000.00	
POP SHOP III (4	4) HAR	HARING, KEITH		•	lated	G11904				\$10,000.00	\$10,000.00	
POP SHOP IV (1) HAR) HARING, KEITH			" from	G25702				\$10,000.00	\$10,000.00	
K TO FOLLOW TERMS O										AMOUNT OF SALE	\$229,000.00	
NK WIRE										TAX	\$0.00	
										TOTAL SALE	\$229,000.00	
										SHIPPING	\$0.00	
										AMOUNT PAID	\$50,000.00	
RECEIVED BY: DATE: APRIL 10, 2014										BALANCE DUE	\$179,000.00	
	SS ebek@lebek.de AYMENT AMEX CHAIR BLONDE (SURREALIST SERIES) HOPE (B/W) POP SHOP III (APOP SHOP III (APOP SHOP IV (APOP SHO	SS ebek@lebek.de AYMENT	SS ebek@lebek.de AYMENT AMEX CHECK CASH TITLE ARTIST INTERIOR WITH CHAIR ROY BLONDE (SURREALIST SERIES) HOPE (B/W) INDIANA, ROBERT POP SHOP III (1) HARING, KEIT POP SHOP IV (1) HARING, KEIT RUCTIONS K TO FOLLOW TERMS OF PAYMENT: INITIAL DEF	PIPO STRICT Bad Marienber	Str. 1 Str. 1	FIRST NAME Barbara FIRST NAME BARDARA WEBSITE EXP. 01/14 TITLE ARTIST DESCRIPTION INTERIOR WITH CHAIR ROY 90t BLONDE (SURREALIST SERIES) HOPE (B/W) INDIANA, ROBERT SILKSCREEN 36X36" POP SHOP III (1) HARING, KEITH Hand signed, dated and nu POP SHOP III (4) HARING, KEITH Hand signed, dated and nu POP SHOP IV (1) HARING, KEITH "Radiant Angel" from Pop RUCTIONS ENTARY INVITATIONS INCLUDED, AS WELL AS, PROFESSIONAL PACKAGING, INSURANK KY OF POLLOW TERMS OF PAYMENT: INITIAL DEPOSIT ON 4/10/2014 AMEX ENDING 1004 AND	FIRST NAME Barbara Str. 1 St	FIRST NAME Barbara STATE COMP. STATE COMP. STATE COL GE COMP. STATE COL GE COMP. STATE COL GE COMP. STATE COL GE COMP. STATE COL GE COMP. STATE COL GE COMP. STATE COL GE COMP. STATE COL GE COMP. STATE COL GE COMP. AUTH. CODE O1/1/14 AUTH. CO	FIRST NAME Barbara COMPANY NAME STATE COUNTRY Bad Marienberg STATE COUNTRY Germany AUTH. CODE 01/14 AUTH. CODE 01/14 AUTH. CODE 01/14 FROP STATE COUNTRY Germany STATE COUNTRY Germany AUTH. CODE 01/14 AUTH. CODE 01/14 AUTH. CODE 01/14 FROP STATE COUNTRY Germany STATE COUNTRY Germany EXP. AUTH. CODE 01/14 AUTH. CODE 01/14	STATE COMPANY NAME Barbara COMPANY NAME STATE COUNTRY Germany GERMANY	STATE COMPANY NAME PROSTAL CENTRY Bad Marienberg STATE COUNTRY COMPANY NAME COUNTRY COMPANY NAME COUNTRY COUNTRY	

ALL CLAIMS AND RETURNED GOODS MUST BE ACCOMPANIED BY THIS INVOICE

THANK YOU