305.932.6166 20633 Biscayne Blvd Aventura FL 33180 GALLART.COM

## **INVOICE # A4711**

| номе рноме<br>(416) 305                         | 5-2736        | BUSINESS P                | HONE  | CELL PH | ONE  |       | PHONE OL | JTSIDE T    | HE US       | FAX                                 |             |                |  | -       | h Heller             | Nover<br>2016 | mber 21    |
|---|---------------|---------------------------|-------|---------|------|-------|----------|-------------|-------------|-------------------------------------|-------------|----------------|--|---------|----------------------|---------------|------------|
| LAST NAME<br>Dadouch                            |               | FIRST NAM<br><b>Aaron</b> |       |         |      |       | COI      | MPANY NAME  |             |                                     |             |                |  |         |                      |               |            |
| ADDRESS 40 Broad St Apt 15c                     |               |                           |       |         |      |       |          |             | STATE<br>NY |                                     |             | COUNTRY<br>USA |  |         | POSTAL CODE<br>10004 |               |            |
| email addres<br>dadoucha                        | l             |                           |       |         |      |       |          | DRIVER'S LI | CENSE#      |                                     |             |                |  |         |                      |               |            |
| METHOD OF PAYMENT VISA/MC AMEX CHECK CASH OTHER |               |                           |       |         |      |       |          |             |             |                                     |             |                |  |         | ORIGIN<br>WALK       | (-IN          |            |
| CREDIT CARD # XXXX-XXXX-XXXX-                   |               |                           |       |         |      |       |          |             | 6           | AUTH. COE                           | ODE ESTIMA' |                |  | STIMATE |                      |               |            |
| QUANTITY  | TITL          | .E                        | ART   | TIST    |      | DE    | ESCRIPT  | ION         |             | ART                                 | ΓID         |                |  |         | PRICE                |               | EXT        |
| 1   | BRID(<br>BARD | _                         | RED   | LIPS    | Pr   | e-Ode | er       |             |             | 000                                 | 00          |                |  |         | \$9                  | 50.00         | \$950.00   |
| 1   | BRID(<br>BARD | _                         | PURPL | E LIP   | S Pr | e-Ord | ler      |             |             | 000                                 | 00          |                |  |         | \$9                  | 50.00         | \$950.00   |
| SPECIAL INSTR                                   | UCTIONS       |                           |       |         | -    |       |          |             |             |                                     |             |                |  | А       | MOUNT OF             | SALE          | \$1,900.00 |
| TO BE SHI                                       | IPPED         |                           |       |         |      |       |          |             |             |                                     |             |                |  |         | TAX                  |               | \$0.00     |
|   |               |                           |       |         |      |       |          |             |             |                                     |             |                |  |         | TOTAL SA             | ALE           | \$1,900.00 |
|   |               |                           |       |         |      |       |          |             |             |                                     |             |                |  |         | SHIPPIN              | G             | \$150.00   |
|   |               |                           |       |         |      |       |          |             |             |                                     |             |                |  |         | AMOUNT F             | PAID          | \$0.00     |
| RECEIVED BY:                                    |               |                           |       |         |      |       |          |             |             | DATE: NOVEMBER 21, 2016 BALANCE DUI |             |                |  |         |                      | DUE           | \$2,050.00 |

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

THANK YOU