305.932.6166 20633 Biscayne Blvd Aventura FL 33180 GALLART.COM

INVOICE # A11443

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LAST NAME Sloane					FIRST NAME Michael				CON	COMPANY NAME				
ADDRESS 625 School Road					Blue Bell			PA		COUNTRY		POSTAL CO 19422	POSTAL CODE 19422	
Michael.S	ss Sloane@1s	stdibs.co	m		WEBSI'					DRIVER'S LI	DRIVER'S LICENSE #			
METHOD OF PAYMENT VISA/MC AMEX CHECK CASH OTHER											ORIGIN	ORIGIN		
CREDIT CARD # XXXX-XXXX-XXXX-							EXP. 01/21	AUTH. COD	CODE			IATE		
QUANTITY	JANTITY TITLE ARTIST			ΓIST	D	ESCRIPT	ΓΙΟΝ	ART ID			PRICE		EXT	
1	YOU AF WONDE (PURF	ERFUL ROMERO numbered				and	G13847				\$1,0	87.50	\$1,087.50	
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ALL CLAIMS AND RETURNED GOODS MUST BE ACCOMPANIED BY THIS INVOICE

THANK YOU