



GALLERY ART

◆ Buying & Selling Fine Art & Collections ◆

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INVOICE # 1246

| | | | | | | |
|---|----------------|---------------------------------------|---------------------------------|--------------------------------------|--------------------------------------|-------------|
| HOME PHONE | BUSINESS PHONE | CELL PHONE 416-789-7156 Ext 223 | FAX | CONSULTANT KEN | DATE November 18 2011 | |
| LAST NAME Bartfield | | FIRST NAME Esther Cohen | | COMPANY NAME Esther Cohen Gallery | | |
| ADDRESS 1180 Caledonia Road | | CITY Toronto | STATE Ontario | COUNTRY Canada | POSTAL CODE M6A 2W5 | |
| EMAIL ADDRESS esther@pifineart.com | | WEBSITE www.esthercohengallery.com | | | DRIVER'S LICENSE # | |
| METHOD OF PAYMENT VISA/MC <input type="checkbox"/> AMEX <input type="checkbox"/> CHECK <input type="checkbox"/> CASH <input type="checkbox"/> OTHER <input type="checkbox"/> | | | | | ORIGIN | |
| CREDIT CARD # | | | EXP. 01/11 | AUTH. CODE | ESTIMATE <input type="checkbox"/> | |
| QUANTITY | TITLE | ARTIST | DESCRIPTION | PRODUCT ID | PRICE | EXT |
| 1 | SANDY | LONGO, ROBERT | SIGNED AND NUMBERED LIMIT... | G10272 | \$10,000.00 | \$10,000.00 |
| 1 | JAMES | LONGO, ROBERT | SIGNED AND NUMBERED LIMIT... | G12118 | \$10,000.00 | \$10,000.00 |
| SPECIAL INSTRUCTIONS | | | | | AMOUNT OF SALE | \$20,000.00 |
| | | | | | TAX | \$0.00 |
| | | | | | TOTAL SALE | \$20,000.00 |
| | | | | | SHIPPING | \$0.00 |
| | | | | | AMOUNT PAID | \$0.00 |
| RECEIVED BY: | | | | DATE: NOVEMBER 18, 2011 | BALANCE DUE | \$20,000.00 |

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

THANK YOU