305.932.6166 20633 Biscayne Blvd Aventura FL 33180 GALLART.COM

INVOICE # 540

номе рноме 786 216 8738				CELL PHO	CELL PHONE		FAX		CONSU	· ·		DATE April 08 2010			
LAST NAME Norman					FIRST Leo	_{NAME} nardo									
ADDRESS															
CITY	STATE	TATE COUNTRY F			POSTAL CODE			EMAIL ADDRESS sfl_leo@live.com					COMPANY NAME		
METHOD OF PAYMENT VISA/MC AMEX CHECK CASH OTHER													ORIGIN WEBSITE		
CREDIT CARD#								EXP. 01/1		AUTH. CODE	DRIV	ER'S LICEN	ISE#		
QUANTITY TITLE ARTIS					DESC			ION		PRODUCT ID		PRICE	EXT		
1			,		ADDITION AVAILAB	additional in Availab		ES	G11068			\$60.00	\$60.00		
SPECIAL INSTRUCTIONS													AMOUNT OF SALE	\$60.00	
TO BE SHIPPED													TAX	\$4.20	
													TOTAL SALE	\$64.20	
												SHIPPING	\$0.00		
														AMOUNT PAID	\$0.00
RECEIVE	RECEIVED BY: DATE: APRIL 08, 2010												BALANCE DUE	\$64.20	

ALL CLAIMS AND RETURNED GOODS MUST BE ACCOMPANIED BY THIS INVOICE

THANK YOU