

BILL OF SALE

Date of Sale _____

Invoice # _____

PURCHASER:

Name _____

Address _____

City, State, Zip _____

Telephone _____

DESCRIPTION OF ARTWORK:

Title: _____

Date: _____

Size: _____

Edition: _____

Medium: _____

Print Price \$ _____

Frame Price \$ _____

Sales Tax \$ _____

Delivery Charges \$ _____

Total \$ _____

COPYRIGHT AND REPRODUCTION RIGHTS RESERVED BY THE ARTIST.

Signature of purchaser: Artwork received in good condition.

Date artwork received.