

Receipt No.

Date

Payout Period

**ARTIST CONSIGNMENT PAYOUT & SALES RECEIPT**

**ARTIST INFORMATION**

Artist Name

Address

Phone

Email

**PAYMENT DETAILS**

Payment Method

Reference No.

Tax ID / SSN

Notes

| ITEM SKU | ARTWORK TITLE & DESCRIPTION | RETAIL PRICE | SPLIT (%) | ARTIST SHARE |
|----------|-----------------------------|--------------|-----------|--------------|
|----------|-----------------------------|--------------|-----------|--------------|

Total Retail Sales

Gallery Commission

Adjustments / Fees

## Net Artist Payout

### ACKNOWLEDGMENT & TERMS

By signing below, the Artist acknowledges receipt of the Net Artist Payout as full and final payment for the sold consigned artwork listed above. The Gallery and the Artist agree that all consignment terms for the listed items have been met and completed in accordance with the original Consignment Agreement.

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Artist Signature

**Date**

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Authorized Gallery Representative

**Date**