

Comité Bengt Lindström 16, rue Dauphine 75006 Paris FRANCE

CERTIFICATE OF AUTHENTICITY REQUEST

| Owner / represer | itative |
|----------------------|--|
| Name: | |
| Adress: | |
| | |
| Telephone: | |
| Email: | |
| In case of represen | tation - information about the owner: |
| | |
| Information abou | it the art work |
| Title: | |
| Medium, material(s | s): |
| Size: | |
| Signature, indicatio | on(s): |
| • | cy of and information about previous owners, if possible): |
| | |
| I herewith c | ertify that all information provided is true and complete. |

SIGNATURE:

Please enclose clear photos of the art work, showing the complete front side and the complete back side, as well as any specific details