

LECARINGTON™

I N T E R N A T I O N A L

REGISTRATION OF OWNERSHIP

ARTE COLLECTOR/BUYER

NAME _____
FIRST LAST

STREET ADDRESS _____

CITY STATE ZIP CODE COUNTRY

EMAIL _____

PHONE _____
MOBILE HOME WORK

DATE OF BIRTH _____ GENDER MALE FEMALE

ARTE HANDBAG INFORMATION

NAME/MONIKER OF HANDBAG _____

SERIAL NUMBER EDITION NUMBER

LOCATION OF PURCHASE _____

PURCHASE DATE _____

PURCHASE RECEIPT ENCLOSED YES _____ NO _____

2 FORMS OF IDENTIFICATION SHOULD BE ENCLOSED (ONE WITH PICTURE ID REQUIRED)

IF THE ARTE COLLECTOR/BUYER SELLS/GIVES/TRANSFERS THEIR HANDBAG TO A NEW COLLECTOR; THE ORIGINAL ARTE COLLECTOR/BUYER WILL NEED TO FILL OUT A [TRANSFER OF OWNERSHIP](#) FORM IN ORDER FOR LECARINGTON INTERNATIONAL TO REISSUE A NEW CERTIFICATE OF AUTHENTICITY TO THE NEW OWNER.