Sarah Stupak 954-599-5226 sarah.stupak@gmail.com



Contract for Painting Commission	
Artist's Name: Purchaser's Name: Contract Date: Title of Painting(s): Medium: Dimensions:	Sarah Stupak [YOUR NAME] MM/DD/YYYY [DESCRIPTIVE PAINTING TITLE] Acrylic [AGREED UPON DEMENSIONS]
Notes: Estimated completion time is [X WEEKS] from receiving deposit.	
Price w/materials + Shipping	
Total Price	\$ [YOUR PRICE]
1. Purchaser agrees to pay a non-refundable amount of 50% of Total Price (\$XXX.XX) to the Artist upon signing this contract and the remaining 50% (\$XXX.XX) upon satisfactory completion of the painting(s) described above. 2. Artist retains all copyrights to the painting, including the right to reproduce, print or publish the work in any way, even after paid for in full.*	
I hereby agree to all terms and conditions set forth in this contract:	
Artist	SARAH STUPAK
Signed handli hayyal	Date MM/DD/YYYY
Purchaser	[YOUR NAME]
Signed	Date

*The Artist is willing to sell the copyright in part or in whole on a case-bycase basis, such as for posters, album covers, book covers, etc.