

FOR CONSIGNEE

FOR SHIPPER

CONSIGNEE NAME 2 Centre Georges Pompidou		ACCOUNT NO.	STATION 015 NFO 0833 1035	
STREET 75191 Paris Cedex 04		TELEPHONE NO. 277-12-33 4328	TWA INTERNATIONAL Next Flight Out	
CITY France. Attn: Marcel Bonnaud	STATE	ZIP		
RECEIVED IN GOOD ORDER EXCEPT AS NOTED		FLIGHT REC.		
DATE	TIME	CARRIER	FLIGHT	TO
SIGNATURE		TWA	94	JFK
SHIPPER NAME 3 The Vasulkas		ACCOUNT NO.	MAXIMUM DECLARED VALUE	
STREET Rt. 6 Box 100		TELEPHONE NO.	NOT TO EXCEED \$250	
CITY Santa Fe, N.M. 87501	STATE	ZIP	FORM OF PAYMENT (PREPAID ONLY)	
CODICE FISCALE IMPRENDITORE <input type="checkbox"/> SI <input type="checkbox"/> NO		5	CASH/CK <input checked="" type="checkbox"/>	
SHIPPER/AGENT 4 <i>Patrick Clancy</i>		PRINT AND SIGN SIGNATURE		ENTER IATA AGENT NO.
CONTENTS 6 Video & Electronic Equip		WEIGHT (LBS.) 19 lbs	5	
CHECK SERVICE REQUESTED		<input checked="" type="checkbox"/> SMALL PACKAGE	<input type="checkbox"/> NFO PAK	<input type="checkbox"/> DELIVER
		<input checked="" type="checkbox"/> HOLD FOR PICKUP	ENTER ACCOUNT NO.	
SPECIAL INSTRUCTIONS/REF. INFORMATION 7		T.W.A. - 48 VIALE BEETHOVEN, ROMA / ISCR. TRIB. ROMA 1317/46 - CCIA 133175 COD. FISC. 00411490584 - NON IMP. IVA ART. 9 - DPR 633/72 E SUCC.		

VALIDATION	
EXECUTED BY: DATE/TIME	
DATE	4/2/84
TIME	0720
B	RECEIVED AT ORIGIN
A	1ST CHARGE 162.00
A	2ND CHARGE
A	3RD CHARGE
F	OTHER
I	TAX
B	PICK-UP
C	DELIVER
R	TOTAL 162.00

Carrier's liability is limited per Item 5 on the reverse side unless shipper requests additional declared value (subject to additional charge). Filing of claims and time limits thereof are governed by conditions of contract on reverse side.
FORM AC 21 INT (1/82)

1 - SHIPPER'S RECEIPT

LIEN NOTICE

Port ALBUQUERQUE NEW ME		Customs Assigned No. G084-22
Consignee or Importer's Name THE WASLUKAS INC.		Carrier TWA
Location of Goods TWA AIR FRT TERMINAL		Date of Notice 6/14/84
B/L No. or CF 7512 No. 15 CDG 8758 4803		Date of Arrival 5/08/84

Marks and Numbers	Number of Packages	Comments
	1	DUPLICATION MATERIAL
Amounts Claimed	Freight \$	Charges \$ 41.00
		Contribution to General Average \$
		Total \$ 41.00

PAID
 T.W.A. MARKET AIR
 CHECK
 AF CR NBR
 AGT. *[Signature]*
 DATE _____

I, the Undersigned, agent of the above-named carrier, certify that the carrier has a lien on the above listed merchandise in accordance with Sections 564 and 613 of the Tariff Act of 1930. I further certify that the information set forth in this notice is true to the best of my knowledge and belief, and that the sum claimed is due and unpaid and was a subsisting lien upon the goods described at the time they passed into customs custody. I understand that sale of this merchandise by the Government for any reason does not entitle claimants to advance notice in the absence of a written request identifying the goods with this notice. I also agree, upon the discharge or satisfaction of this lien, to promptly notify the Customs office at the above-named port by filing a written release or receipt showing payment of the claim in full.

Date 6/14/84	Title and Signature AGENT IN CHARGE <i>[Signature]</i>
------------------------	---------------------------------------------------------------------

Claimant's Statement The amounts claimed as due and unpaid have been satisfied.	Customs Disposition

Date	Signature and Title
------	---------------------

Date	Signature
Customs Officer	

PURCHASE ORDER

ORDER NO.

9316

TO	Centre Georges Pompidou 75191 Paris Cedex 04	SHIP TO	The Vasulkas, Inc Rt. 6, Box 100,
ADDRESS	FRANCE Att: Marcel Bonnaud	ADDRESS	Santa Fe, New Mexico, 87501, USA
CITY	Michele Bargaues Tel: 277-12-33, x4328	CITY	Tel: 505 473 0614
	STATE	STATE	ZIP

FOR	REQ. NO.	DATE REQUIRED	HOW SHIP	TERMS	DATE	
QUANTITY		PLEASE SUPPLY ITEMS LISTED BELOW			PRICE	UNIT
ORDERED	RECEIVED					
1		PLEASE RETURN:				
2	2	- SONY-KCA 60 Videocassettes with program A & B of "The West"				
3	1	- Custom built 2 Channel Synchronizer				
4	2	- SONY RCC-3C Remote control cables				
5	2	- Audio Y-Splitters				
6	1	- Aluminum carrying case				
7		All items are shipped in a single package				
8		Package weight 20 LBS				
9		The Value of this package does not exceed \$250.00				
10		-----*				
11		Also:	Please pay exhibiting fee for "The West"	\$2,000.00		
12			into bank account 61-486-6 of First Interstate Bank,			
13			(deposit slip included with this invoice).			
14			Santa Fe, May 9, 1984,	Woody Vasulka		
15						
16			Cc: Anne Marie Stein			
17						

↓ TOTAL 2000.00

IMPORTANT

OUR ORDER NUMBER MUST APPEAR ON ALL INVOICES, PACKAGES, ETC.

PLEASE NOTIFY US IMMEDIATELY IF YOU ARE UNABLE TO SHIP COMPLETE ORDER BY DATE SPECIFIED.

PLEASE SEND

COPIES OF YOUR INVOICE WITH ORIGINAL BILL OF LADING.

PURCHASING AGENT

015 CDG 87584803

INTL

015 87584803

Shippers Name and Address

Shippers account Number

CENTRE POMPIDOU
CINEMA DU REEL
PARIS
FRANCE

TWA CARGO

NOT NEGOTIABLE
AIR WAYBILL
(AIR CONSIGNMENT NOTE)
ISSUED BY
TRANS WORLD AIRLINES, INC.
KANSAS CITY, MISSOURI, U.S.A.

Member of International
Air Transport Association

Copies 1, 2 and 3 of this Air Waybill are originals and have the same validity

Consignee's Name and Address

Consignee's account Number

THE WASLUKAS INC
RTL BOX 100
SANTA FE
NW MEX87501 USA

It is agreed that the goods described herein are accepted in apparent good order and condition (except as noted) for carriage SUBJECT TO THE CONDITIONS OF CONTRACT ON THE REVERSE HEREOF. THE SHIPPER'S ATTENTION IS DRAWN TO THE NOTICE CONCERNING CARRIERS' LIMITATION OF LIABILITY. Shipper may increase such limitation of liability by declaring a higher value for carriage and paying a supplemental charge if required.
"CARRIER IS FULLY INSURED UNDER LIABILITY INSURANCE POLICIES IN EXCESS OF ANY APPLICABLE DEDUCTIBLE PROVISIONS."

Issuing Carrier's Agent Name and City

Accounting Information

SITT

Agent's IATA Code

Issuing carrier's agent, account no.

2047067

Airport of Departure (Addr. of first Carrier) and requested Routing

PARIS/DEGAULLE

to	By first Carrier	Routing and Destination	to	by	to	by	Currency	C-100 Code	WT/WAL	Other	Declared Value for Carriage	Declared Value for Customs
JFK	TW				ABQ	TW	FFR	PK			NVD	NCV

Airport of Destination

Flight/Date For Carrier Use only Flight/Date

Amount of Insurance

INSURANCE - If Carrier offers insurance, and such insurance is requested in accordance with conditions on reverse hereof, indicate amount to be insured in figures in box marked amount of insurance.

ALBUQUERQUE

~~010570~~ 03MAY 84

Handling Information: These commodities licensed by the United States for ultimate destination.....Diversion contrary to United States law prohibited.

No. of packages RCP	Actual gross weight	kg	Rate class	Chargeable weight	Rate/Charge	Total	Nature and quantity of goods (incl. dimensions or volume)
			Commodity item no.				
1	5.0	KG		5.0	M390.000	390.00	DUPLICATION MATERIAL

PAID
T.W.A. MARKET AIR
CHECK
APR 18 1984
CASH
DATE

Prepaid	Weight Charge	Collect	Other Charges
390.00			CA 5.00 Input Doc.
Valuation Charge			
Tax			
Total other Charges Due Agent			
26.00			
Total other Charges Due Carrier			
39.00			
XXXXXXXXXXXX			
XXXXXXXXXXXX			
Total Prepaid			
455.00			
Currency Conversion Rates		cc charges in Dest. Currency	
For Carriers Use only at Destination		Charges at Destination	
EXECUTED ON (Date) at (Place)		SIGNATURE OF ISSUING CARRIER OR ITS AGENT	
02MAY84 CDG			
TIME ACCT 0950			
DATE ACCT 03MAY84			



CASH RECEIPT

RECEIVED OF The Waslucan

ADDRESS Rt 6 Box 100
Santa Fe NM

CUSTOMS OFFICER Ruby DATE 4/84 CASE NO.

ACCT. CLASS. CODE	USER CHARGE CODE	REMARKS	AMOUNT
60	40	Storage. GO-84-22	14 50
60	41	Cartage	7 50

Customs Officer Shall Check Applicable Statements
 The Duty Assessment Is Liquidated. TOTAL 22 00

Space below for use in collections relating to a violation of law.

COMMENTS

SECTION OF LAW VIOLATED:
 Section 497 Tariff Act 1930 Failure to Declare
 Section 592 Tariff Act 1930 False Declaration
 Section _____
(Other Citation)

NOTE: Importer may protest duties which are believed to be incorrect. Protest must be filed on Customs Form 19 (or an exact copy) within 90 days of liquidation date. Direct protest to issuing port, accompanied by this receipt or a copy.

ORIGINAL - Payer's Receipt
DUPLICATE - Collection Copy
TRIPLICATE - Record Copy
Customs Form 5104 (4-5-74)