

FINAL SETTLEMENT

SELLER NAME WARREN COUNTY SCHOOL DISTRICT Attention DATE OF SALE NOVEMBER 17th, 2007
 ADDRESS 185 Hospital Dr. Boyd Freeborough PHONE 814-723-6900
Warren Pa. 16365 ZIP _____
 LOCATION OF SALE PLEASANT TOWNSHIP ELEMENTARY - McKinley St, Warren
 AUCTIONEER COX FAMILY AUCTION COMPANY PHONE (814) 664-7526

SELLER'S EXPENSES

PROFESSIONAL FEES

AUCTIONEER 10% \$ 2567.85

CLERK \$ _____

CASHIER \$ _____

OTHER EXPENSES

ADVERTISING \$ 500.00

RINGMEN \$ 565.00

*will send
within 10 days*

TOTAL EXPENSES \$ 3632.85

RECEIPTS

CASH \$ 4057.50

CHECKS \$ 21417.50

OTHER RECEIPTS

CREDIT CARD RECEIPTS \$ 209.50

*Thank Again
for a nice auction
at Jeff's Family
& Co.*

TOTAL RECEIPTS \$ 25678.50

LESS TOTAL EXPENSES \$ 3632.85

NET PROCEEDS PAYABLE TO SELLER \$ 22045.65

I (or we), the seller, accept this settlement and acknowledge receipt of the above specified net proceeds from the auction of my goods and property sold on the above date. I accept all responsibility for providing merchantable title to all goods, and property sold, and for delivery of title to the purchaser.

[Signature]
Auctioneer or Cashier's Signature
Date _____

[Signature] 11/17/07
(Seller's Signature) Date _____
[Signature]
(Seller's Signature) Date _____