

Original Receipt. Clerk: ADMIN

MT SINAI ASSOCIATES SHIMONY GROUP
(SWP)-012310011009-SHIMONY GROUP
485 MADISON AVE
012309594429 NY 10037
PHONE: [REDACTED]



Re: Jagard, Thorbjorn

Name: JEFFREY EPSTEIN
Card Number: [REDACTED]
Card Exp Date: XX/XX Card Present
Transaction Type: VISA SALE
Transaction Amount: \$1995.00
Auth Code: 05142D
AVS Reply: (D) PSTRY
Ticket #: [REDACTED]
Date: 09/27/12 04:45:04 PM

CARDMEMBER ACKNOWLEDGES RECEIPT OF
GOODS AND/OR SERVICES IN THE AMOUNT OF
THE TOTAL SHOWN HEREIN AND AGREES TO
PERFORM THE OBLIGATIONS SET FORTH BY
THE CARDMEMBER'S AGREEMENT WITH ISSUER

~~_____~~

SIGNATURE

MERCHANT COPY