Visioncon Art Show Control Sheet

Sheet _____ of _____

Artist Name: _____

Telephone #: _____

Check in Piece	Piece #	Title	Sale Price	Sun Sale Price	Sold For

AFTER CHECK IN, STAFF ONLY:

Total Number of Pieces Received: _____ Initials: _____ Date: _____

AFTER SHOW, STAFF ONLY:

Total Number of Pieces Returned: _____ Initials: _____ Date: _____

Total Sold: $_____
- 10% $_____
Total Earned: $_____
Check #:   _____
Check Enclosed? _____