

CON+STELLATION ART SHOW CONTROL SHEET

Page of

Artists should complete the non-gray blank fields. Please give the name our checks should be written to.

Artist: _____ Address: _____ _____ Phone: _____ E-mail: _____ Web Site: _____	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th align="center" colspan="2">Art Show Fees Payable by Artist*</th> </tr> <tr> <td>Number of Panels: _____ x \$15 per panel :</td> <td align="right">\$ _____</td> </tr> <tr> <td>Number of Tables: _____ x \$15 per table:</td> <td align="right">\$ _____</td> </tr> <tr> <th align="center" colspan="2">Return Shipping Funds Provided:</th> </tr> <tr> <td>Pre-Paid: _____ or Check# : _____</td> <td align="right">\$ _____</td> </tr> <tr> <td align="right" colspan="2">Total Paid: \$ _____</td> </tr> <tr> <td align="right" colspan="2">Check#: _____</td> </tr> </table>	Art Show Fees Payable by Artist*		Number of Panels: _____ x \$15 per panel :	\$ _____	Number of Tables: _____ x \$15 per table:	\$ _____	Return Shipping Funds Provided:		Pre-Paid: _____ or Check# : _____	\$ _____	Total Paid: \$ _____		Check#: _____	
Art Show Fees Payable by Artist*															
Number of Panels: _____ x \$15 per panel :	\$ _____														
Number of Tables: _____ x \$15 per table:	\$ _____														
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Pre-Paid: _____ or Check# : _____	\$ _____														
Total Paid: \$ _____															
Check#: _____															

Return my unsold items using (check one): **USPS** **UPS** **FEDEX** **Other:** _____

Return my unsold items with the following amount of Insurance: \$ _____

It takes three bids to send a piece from the written auction to the voice auction.

i n	#	Title or Description	Minimum Bid	Immediate Purchase	After Auction	Buyer's Name & Badge Number	Sold
	1		\$	\$	\$		\$
	2		\$	\$	\$		\$
	3		\$	\$	\$		\$
	4		\$	\$	\$		\$
	5		\$	\$	\$		\$
	6		\$	\$	\$		\$
	7		\$	\$	\$		\$
	8		\$	\$	\$		\$
	9		\$	\$	\$		\$
	10		\$	\$	\$		\$
	11		\$	\$	\$		\$
	12		\$	\$	\$		\$
	13		\$	\$	\$		\$
	14		\$	\$	\$		\$
	15		\$	\$	\$		\$
	16		\$	\$	\$		\$
	17		\$	\$	\$		\$
	18		\$	\$	\$		\$
	19		\$	\$	\$		\$
	20		\$	\$	\$		\$
	21		\$	\$	\$		\$
	22		\$	\$	\$		\$
	23		\$	\$	\$		\$
	24		\$	\$	\$		\$
	25		\$	\$	\$		\$

The following section is for Art Show Staff use only. Use only on Page 1. Ignore this section on further pages (if any).

# In:			+Total Sales:		\$
# Sold:			- Unpaid Fees Due:		\$
# Out:			Shipping Costs:	\$	
	Dates		+/- Diff. Return Shipping Funds:	\$	
Shipped:			+Total Print Shop Sales (if any):	\$	
Paid:			Total Due Artist: Check#:	:	\$