ART SHOW CONTROL SHEET

Conucopia NASFIC '99

PAGE # __OF __.

ARTIST'S #_____
LOCATION # _____

ARTIST'S NAME: _____
ADDRESS: _____
_____
_____

PHONE: _____
E-mail: _____

AGENT: _____
ADDRESS: _____
_____
_____

PHONE: _____
E-mail: _____

RELEASE ADDRESS IF REQUESTED?
YES/NO

ACCREDITED PRESS PHOTOGRAPHY?
YES/NO

PIECE #	TITLE OF PIECE (please type or print neatly)	Min. bid sale after close? Y/N	MINIMUM BID	BUYER #	SOLD AT

NO. OF 2D PIECES _____
NO OF 3D PIECES _____
TOTAL ITEMS ENTERED_____
AMOUNT OF SPACE FEE_____
PAID $_____
ACCEPTED BY_____

TOTAL SALES $_____
LESS 10% COMMISSION $_____
SHIPPING ADVANCE $_____
SHIPPING FEE $_____
BALANCE $_____
PLUS/LESS $_____
BALANCE DUE ARTIST $_____

DO NOT WRITE IN THIS SPACE - SHADED AREA FOR OFFICIAL USE ONLY

NO. OF ITEMS SOLD_____
NO. OF ITEMS RETURNED_____
ART PICKED UP BY_____

PAID BY CASH/CHECK # _____
DATED_____INITIALS_____
PAYMENT RECEIVED BY _____

I have read and understand the "Rules and Information for Artists and Agents" for the Conucopia NASFIC '99 Art Show:

x _____
signature of Artist/Agent