Visioncon Art Show Control Sheet

Sheet ____ of _____

Artist Name: _____

Telephone #: _____

Check in Piece	Piece #	Title	Min Bid	Quick Sale	Sun 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% $