



Westercon 70

LepreCon 43 | ConAlope

Art Control Sheet

Artist Name: _____ Publicity/Archive photos allowed: _____

Street: _____ Address available to other shows: _____

City: _____ State: _____ Zip _____ e-Mail: _____

Main Art Categories: _____ Home Phone: _____

Agent Name: _____ Phone: _____

Street: _____ Fax: _____

City: _____ State: _____ Zip _____ e-Mail: _____

Fees Paid: \$ _____ Check #: _____ # In: _____ By: _____ # Out: _____ By: _____ # Panels/Tables: _____

| Piece | Title | Min Bid | Direct Sale | Total | Buyer |
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Base Sales: _____ Commission: _____ Sub-Total: _____

Postage Paid: _____ Postage Amount: _____ Postage Over/Under: _____

Postage Check: _____ Artist Payment Check: _____ Total from Print Shop: _____

Total to Artist: _____

I have read and understood the Art Show rules: _____