

PHILCON ART SHOW CONTROL SHEET

Artist's Name _____ **E-mail** _____

Address _____ **Tele.#** _____

City _____ **State** _____ **Country** _____ **Zip** _____ **Pro** [] **Amateur** []

Agent's Name _____ **E-mail** _____

Address _____ **Tele.#** _____

City _____ **State** _____ **Country** _____ **Zip** _____ **Pay to Agent** []

Item Code	Title	Minimum Bid/Price	Quick Sale Price	Sold for	Sold to Name of Buyer	Bidder Number
01:	_____	:\$ _____	:\$ _____	:\$ _____	_____	_____
02:	_____	:\$ _____	:\$ _____	:\$ _____	_____	_____
03:	_____	:\$ _____	:\$ _____	:\$ _____	_____	_____
04:	_____	:\$ _____	:\$ _____	:\$ _____	_____	_____
05:	_____	:\$ _____	:\$ _____	:\$ _____	_____	_____
06:	_____	:\$ _____	:\$ _____	:\$ _____	_____	_____
07:	_____	:\$ _____	:\$ _____	:\$ _____	_____	_____
08:	_____	:\$ _____	:\$ _____	:\$ _____	_____	_____
09:	_____	:\$ _____	:\$ _____	:\$ _____	_____	_____
10:	_____	:\$ _____	:\$ _____	:\$ _____	_____	_____
11:	_____	:\$ _____	:\$ _____	:\$ _____	_____	_____
12:	_____	:\$ _____	:\$ _____	:\$ _____	_____	_____
13:	_____	:\$ _____	:\$ _____	:\$ _____	_____	_____
14:	_____	:\$ _____	:\$ _____	:\$ _____	_____	_____
15:	_____	:\$ _____	:\$ _____	:\$ _____	_____	_____
16:	_____	:\$ _____	:\$ _____	:\$ _____	_____	_____
17:	_____	:\$ _____	:\$ _____	:\$ _____	_____	_____
18:	_____	:\$ _____	:\$ _____	:\$ _____	_____	_____
19:	_____	:\$ _____	:\$ _____	:\$ _____	_____	_____
20:	_____	:\$ _____	:\$ _____	:\$ _____	_____	_____

Verified by (Art Show Staff): _____

#Pieces Sold _____ :\$ _____ :#Pieces Retd _____

Bid/Auction Sales Summary:

Bid /Auction Sales: pg. 1 \$ _____

pg. 2 \$ _____

Print Sales: pg. 1 \$ _____

pg. 2 \$ _____

Total Sales : \$ _____

Gross Due Artist : \$ _____

Fees/Postage Owed : \$ _____

Net Due Artist : \$ _____

Mail - in Artist Accounting:

Total Money Prepaid: \$ _____

Check (s) # _____

Mail-in Fee: \$ _____ 10.00 _____

Return Postage Expense: \$ _____

Insurance Receipt# _____

Fees/Postage Owed to Philcon: \$ _____

Fees/Postage Owed to Artist : \$ _____

Paid: Date _____ **Check #** _____

Art Returned to:

Signature: _____

Philcon Treasurer/Art Show Director

Signature: _____

Artist/Agent