## **Print Shop Control Sheet**

ntion:	_						
Name:		-					
	State:Zip:	E-	Mail:				
e Phone:	Main Art Categories:						
ent:		Fee's Paid:		Check #	Check #		
nt Address:			# Pieces Checked in				
nt City:				ıt E			
nt State: Agent Zip				Location:			
nt Phone:				Panels/Tables:			
Pieces Piece N		Price Each	# Sold	Total	Buy		
Driv							
	Base Sales: Com			mission: Sub total:			
Postage Paid:	Postage Amount:						
Postage Check#	Artist Payment Check #	Total from Print Shop:					
				l to Artist:			

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