

Westercon 67Art Show Control Sheet

Please send this form in with your art.
Please make sure this name matches your registration.

Artist Full Name: _____ Page _____ of _____

Piece #	Title of Work	Original	Min Bid	Quick Sale	Final Sale	Final Bidder	Checked Out
1		Y / N					
2		Y / N					
3		Y / N					
4		Y / N					
5		Y / N					
6		Y / N					
7		Y / N					
8		Y / N					
9		Y / N					
10		Y / N					
11		Y / N					
12		Y / N					
13		Y / N					
14		Y / N					
15		Y / N					
16		Y / N					
17		Y / N					
18		Y / N					
19		Y / N					
20		Y / N					
21		Y / N					

Art Show Use Only

In:	Date:	Out:	Date:
Panel Number(s):		Hanger:	
Packed by:	Date:	Artist/Agent/AS:	Date: