

foolscap art show control form

Artist name: _____ Agent name: _____
 Address: _____ Address: _____
 Email: _____ Email: _____
 Phone: _____ Phone: _____

	Title of Art	Description of Art (type/size/format)	Price	Sold
1			\$	
2			\$	
3			\$	
4			\$	
5			\$	
6			\$	
7			\$	
8			\$	
9			\$	
10			\$	

Subtotal: \$ _____
 Space Fee \$ _____ + 10% Commission \$ _____ = fees: <\$ _____>
 Fees Paid \$ _____

Artist Total \$ _____