The Arts Center

CONSIGNMENT INVENTORY SHEET Date:_____

Completion of this form indicates acceptance of the terms in The Arts Center Art Shop Policy Agreement.

Name: _____ Business Name: _____

Address: _____

City, State, Zip: _____ Phone: _____ E-mail: _____

Artist's Own Item#	Quantity	Description and/ or medium	Selling Price	Arts Center Inventory#

Artist's Own Item#	Quantity	Description and/ or medium	Selling Price	Arts Center Inventory#