DeepSouthCon 50 PRINT SHOW CONTROL SHEET Page of					
Artists should complete the non-gray blank fields. Please give the name our checks should be written to.					
Artist: Print Shop Fees Payable by Artist*					
Address:			Number	of Print Series: _	x \$2 each : \$
			* Note that a single check for the total		
			of both Art Show and Print Shop fees is		
Phone:			acceptable.		
E-mail:			Return Shipping Funds Provided: \$		
Web Site:			Pre-Paid: or Check# :		
					Total Paid: \$
					Check#:
_	• 5 7 =	USPS			Other:
Return my unsold items with the following amount of Insurance: \$					
	We ask that single quantity prints be				
i #	Title or Description of Each Print Series	Quantit	' I	-	ly Total Sales Amount Per Series
n 1			\$	int	\$
1			Ψ		Ψ
2			\$		\$
					·
3			\$		\$
4			\$		\$
5			\$		\$
			ф		Φ.
6			\$		\$
7			\$		\$
'			P		\$
8			\$		\$
			Ψ		Ψ
9			\$		\$
10	<u></u>		\$		\$
LIMIT OF 10 PRINT SERIES PER ARTIST					
The following section is for Art Show Staff use only. Use only on Page 1. Ignore this section on further pages (if any).					
# In: Add the print shop sales to page the Art Show Control Sheets (f any) for - Unpaid Fees Due: \$		'
the same artist					
# Out:				Shipping Costs: \$	
Dates				+/- Diff. Return Shipping Funds: \$	
Shipped:				,	Total Due Artist:
Paid:					Check#:: \$