MEMBERS NAME: FIRST_____LAST_____

WESTSHORE QUILTERS GUILD SALE INVENTORY SHEET

SALE SHIFT TIMES_____ PHONE#_____

PERSON PICKING UP UNSOLD ITEMS_____

Please attach a stamped self-addressed envelope

ITEM NO.	DESCRIPTION	PRICE	DO NOT USE

Total Sales	
Less WQG Commission	
Net Sale Proceeds to Member	

CHECKED IN BY (please print name)_____

CHECKED OUT BY (please print name)_____