

Equipment Sales Only On This Sheet

(NAME)

(ADDRESS LINE 1)

(ADDRESS LINE 2)

(CITY) (STATE) (ZIP)

() _____ - _____
(PHONE)

CONSIGNMENT NO. _____ **A**



Help us keep our costs low by supplying your e-mail address so we can send you your spring and fall sale flyers.

_____@_____

| Quantity In Box | Brief Description | Comments |
|-----------------|-------------------|----------|
| 1. _____ | _____ | _____ |
| 2. _____ | _____ | _____ |
| 3. _____ | _____ | _____ |
| 4. _____ | _____ | _____ |
| 5. _____ | _____ | _____ |
| 6. _____ | _____ | _____ |
| 7. _____ | _____ | _____ |
| 8. _____ | _____ | _____ |
| 9. _____ | _____ | _____ |
| 10. _____ | _____ | _____ |
| 11. _____ | _____ | _____ |
| 12. _____ | _____ | _____ |
| 13. _____ | _____ | _____ |
| 14. _____ | _____ | _____ |
| 15. _____ | _____ | _____ |
| 16. _____ | _____ | _____ |

Office Use Only

| | | | | |
|------------------------------|---|---|---|----------------------------|
| _____ | - | _____ | = | _____ |
| Total Equipment Sales | | 20% Commission | | Net Equipment Sales |
| | | Less: Purchases Not Yet Paid For | | _____ |
| | | Amount Paid to Seller | | _____ |

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