

# Inventory Sheet

Business Name (if any): \_\_\_\_\_

Artist Name: \_\_\_\_\_ Phone \_\_\_\_\_

Address: \_\_\_\_\_ Zip Code: \_\_\_\_\_

E-mail address: \_\_\_\_\_

#	Drop Off Date	Description	Inventory Number	Price	Date Sold / McCord Rep Initials	Date Paid	Pick-Up Date/ Initial
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