Langley Quilters Guild - Gift Shop Inventory Sheet

Name _____ **Member #** _____

Phone# _____

Mailing Address: _____

_____

ITEM #	DESCRIPTION	PRICE	SOLD	RETURNED

Checked in by: _____ **Checked out by:** _____

I have received and reviewed the Langley Quilters Guild Rules for participation in the Gift Shop. I agree to all of the terms, including limits of liability.

Signature _____ **Date:**_____ **Witness:**_____

Person authorized to pick up items at checkout: _____

Cheque #

Date issued:

Total $ collected	
Less 15%	
Balance Paid out	