

BASCON OPT SHEET

FILL OUT AS MANY SHEETS AS YOU NEED, THEN EMAIL THEM TO DEBBIE ROJANO (OPT@BASCON.ORG) OR BRING THEM IN WITH YOUR ITEMS.

OWNER/AGENT:						
ADDRESS:						
PHONE:						
E MAIL:						
SIGNATURE:						
#	QTY	DESCRIPTION (GEN OR SLASH ZINE, TOY, PRINT, ETC.)	ITEM NAME/TITLE	PRICE	QTY SOLD	TOTAL
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
SUB TOTAL:						
15% COMMISSION:						
SHIPPING (IF APPLICABLE):						
GRAND TOTAL:						