Name: _____
Phone:_____ Address:_____
Cell#: _____ _____
Email:_____ _____

* Your HHS checker will check off the "In" column as you drop off inventory. Our barcode register will provide sales totals of each of your listed price points at the end of the show and pay you accordingly. You are welcome to include business cards to be displayed with your items.

****Please do not include Gifted Inventory, Props or Samples on this grid**. Rather, note these in margins. Label all loaned props/samples with your name and contact information for guaranteed return.

Item	Description	IN Check	Qty.		Unit Price
Example: **Plates**	**Prior to check-in, fill in these fields:* **7" round red clay**		**12**		**15.00**

IN - Checker Initials: _____
Vendor In-Check Initials: _____

Subtotal: _____
- H.H.S. 25% Commission: _____
Grand Total:

Check#:_____
Paid Vendor Signature: _____
Fee reduction verified? Yes / No

Item	Description	IN Check	Qty.		Unit Price