



Littleton Fine Arts Guild

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City, State, ZIP: \_\_\_\_\_  
 Phone: \_\_\_\_\_  
 Email: \_\_\_\_\_

**For *Bin Work* only**

Depot Event: \_\_\_\_\_

Item #	Name and Description	Media	Price	Date In	Date Sold	Date Out
		Bin Work				
		Bin Work				
		Bin Work				
		Bin Work				
		Bin Work				
		Bin Work				
		Bin Work				
		Bin Work				
		Bin Work				
		Bin Work				
		Bin Work				
		Bin Work				
		Bin Work				
		Bin Work				
		Bin Work				
		Bin Work				
		Bin Work				
		Bin Work				