-9-	2019 South Shore Stitchers Country Store			4	Initials + #	
	Consignment Form		K	A A		
Initials:		Date:			Pgof_	
Name:		Phone			<u>9</u>	
Address:		State:		Zip:		
City:						
			I	L	I	Д.,,
Item #	Description: Type of item, Size, Color	Qty	Price each	# sold	\$ Amt sold	Net ret'd.
						-
	Totals:					
	Total amount sold:	\$			Data naidi	
	Less 10% commission to SSS's (15% for non-members)	\$			Date paid:	
	Net Amount Due	\$			Check #	
NOTE:	Attach tags to all items with the following info:	Ψ		-		
	description, size, color, price and your initials + #					
	, , , , , , , , , , , , , , , , , , , ,					
	THANK YOU FOR YOUR COOPERATION.					