

Trinity Gallery Bin Entries
Date of Show _____



Artist:

Name _____

Address _____

Tel. _____

Art Works:

1. Title _____

Medium _____

Price _____

2. Title _____

Medium _____

Price _____

3. Title _____

Medium _____

Price _____

4. Title _____

Medium _____

Price _____

5. Title _____

Medium _____

Price _____

6. Title _____

Medium _____

Price _____

(Gallery Sitter: Please mark this sheet when a piece is sold)