**GROUP NAME**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Group number: \_\_\_\_\_\_\_\_\_\_\_

**DATE/S OF EXHIBITION**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Receipt number: \_\_\_\_\_\_\_\_\_\_

**CONTACT NAME:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **CONTACT EMAIL:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **CONTACT PHONE:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**INSTRUCTIONS:**

* Designate each exhibit with a number, maker’s name, brief description and value.
* Make sure each quilt is receipted on delivery at the collection point.
* Ensure that exhibitors or their nominees sign for each quilt on collection at the end of the show.
* Keep a copy of this form in a secure place, NOT at the exhibition site.
* You are not required to send a copy to SA Quilters.
* Please add rows or photocopy if space is insufficient.

| **Exhibit No** | **Exhibitor’s name** | **Brief description** | **Value** | **Received by** | **Collected by** |
| --- | --- | --- | --- | --- | --- |
| e.g. 1 | Mary A….. | Ohio star, green and cream, machine pieced and quilted | $250 | Jane B….. | Mary A….. |
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