

CCHE Curriculum Sale Item Check-In Sheet (Please leave all gray areas blank.)

NOTE: We will not accept more than five (5) items per seller of materials published for use in public schools.

Name: _____ E-Mail Address: _____

Address: _____

City: _____ State: _____ Zip + 4: _____

Phone No.: _____ CCHE Member? Yes No

I will not hold CCHE, any representative of CCHE, or any booksale workers responsible for any lost, stolen or damaged items.

Signature: _____ Date: _____

	Ck in	Title & Publisher and/or Description of Item	Grade	Subject	Price (in 25 cent increments)	CCHE Issued No.	Ck Out
1					\$		
2					\$		
3					\$		
4					\$		
5					\$		
6					\$		
7					\$		
8					\$		
9					\$		
10					\$		
11					\$		
12					\$		
13					\$		
14					\$		
15					\$		
16					\$		
17					\$		
18					\$		
19					\$		
20					\$		