

Niagara Antique Power Association

Trading Post Inventory

N.A.P.A. Vendor Number

Name: _____ Address: _____

Application Date: _____ Phone: _____ Cell: _____

Item No.	Item Description	Asking Price	Lowest Price	Received
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				
12.				
13.				
14.				
15.				
16.				
17.				
18.				
19.				
20.				
			Total Sales	
			Less 10%	
			Net Amount	

Signature Of Vendor - denoting receipt of NET AMOUNT

Date