



# AUCTION FORM

Item #
Staff Use Only

Item: \_\_\_\_\_

Description: \_\_\_\_\_

Donor Name: \_\_\_\_\_ Value: \_\_\_\_\_

Staff Use Only	Starting bid _____ in increments of: _____	<input type="checkbox"/> SILENT AUCTION
		<input type="checkbox"/> LIVE AUCTION

Write Your Name Legibly- You can't win it if we cant read it!

Name

Amount

1	_____	_____
2	_____	_____
3	_____	_____
4	_____	_____
5	_____	_____
6	_____	_____
7	_____	_____
8	_____	_____
9	_____	_____
10	_____	_____
11	_____	_____
12	_____	_____
13	_____	_____
14	_____	_____
15	_____	_____
16	_____	_____
17	_____	_____
18	_____	_____