

Interfilk Silent Auction

Bid Sheet Page # _____

Item #:

Donated by:

Item Description:

Retail Value: _____ Minimum Bid: _____

*See posted Auction Instructions for deadlines,
Silent Auction closing time, and any changes.*

Bid #	Bidder Name	\$
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
11		
12		

For Interfilk Use Only
Do not fill out below this line

Highest Bidder: _____

Paid by:

Check #: _____ Cash: _____

Credit: _____

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