



SouthWestern Michigan Aquarium Society

PO Box 3095, Kalamazoo, Michigan 49003-3095 www.swmas.org



Auction Registration Form

SWMAS Auction Date: _____

| Item # | Description / Species Name | Qty / Sex in Bag | Final Bid |
|--------|----------------------------|------------------|-----------|
| 1 | | | |
| 2 | | | |
| 3 | | | |
| 4 | | | |
| 5 | | | |
| 6 | | | |
| 7 | | | |
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| 16 | | | |
| 17 | | | |
| 18 | | | |
| 19 | | | |
| 20 | | | |

This form is intended for a maximum of 50 items only.

After you have used Adobe® Reader® to fill out this form, Avery® 5161™ 1" x 4" compatible labels will be generated automatically, or you may use plain paper, cut out the labels, and attach them to the sale items with clear tape. Remember you will NOT be able to save your forms with Adobe® Reader® unless you have additional software.

Subtotals from Page 1

Subtotals from Page 2

Subtotals from Page 3

| | | | |
|------------------|--------------|---|--|
| Seller ID | Name: | Total Final Bid | |
| | Street: | Less SWMAS Amount | |
| | City St Zip: | Amount Due Seller | |
| | Phone: | Auction Proceeds: <input type="checkbox"/> All Donation <input type="checkbox"/> Split 70% / 30% | |
| | E-Mail: | | |



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|--------|----------------------------|------------------|-----------|
| 21 | | | |
| 22 | | | |
| 23 | | | |
| 24 | | | |
| 25 | | | |
| 26 | | | |
| 27 | | | |
| 28 | | | |
| 29 | | | |
| 30 | | | |
| 31 | | | |
| 32 | | | |
| 33 | | | |
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| 35 | | | |
| 36 | | | |
| 37 | | | |
| 38 | | | |
| 39 | | | |
| 40 | | | |

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Subtotals from Page 2

| | | | |
|------------------|--------------|--|--|
| Seller ID | Name: | | |
| | Street: | | |
| | City St Zip: | | |
| | Phone: | | |
| | E-Mail: | | |



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| Item # | Description / Species Name | Qty / Sex in Bag | Final Bid |
|--------|----------------------------|------------------|-----------|
| 41 | | | |
| 42 | | | |
| 43 | | | |
| 44 | | | |
| 45 | | | |
| 46 | | | |
| 47 | | | |
| 48 | | | |
| 49 | | | |
| 50 | | | |
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Subtotals from Page 3

| | | | |
|------------------|--------------|--|--|
| Seller ID | Name: | | |
| | Street: | | |
| | City St Zip: | | |
| | Phone: | | |
| | E-Mail: | | |

