2024 CONSIGNMENT FORM

THE ANNISQUAM EXCHANGE
32 LEONARD STREET
GLOUCESTER MA 01930

Name_____
Address:_____
_____
Phone #_____

EMAIL ADDRESS:_____Consignment#_____

ITEM #	ITEM DESCRIPTION	PRICE	SOLD

_____ _____

CONSIGNOR SIGNATURE EXCHANGE REPRESENTATIVE/DATE

www.annisquamexchange.com