



SCAAS

MONTHLY AUCTION SHEET

SELLER #

NAME _____ DATE ____ / ____ / ____

#	DESCRIPTION	1.) DONATION 2.) B.A.P.		MIN BID \$	PRICE SOLD \$
		✓			
		1	2		

NUMBER OF ITEMS	TREASURERS USE ONLY	
	SUB	\$ _____ .00
PAGE ____ OF ____	DONATION	\$ - _____ .00
	TOTAL	\$ _____ .00
AUCTION % CUT 70 / 30	30%	\$ _____ .
	70%	\$ _____ .



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