

DISCIPLES CDC CONSIGNMENT SALE CONTRACT

Name : _____ Seller # : _____

Mailing Address: _____ City: _____

_____ State: _____ Zip: _____

Phone: _____ Email : _____

I understand and agree to the following: (Check one)

_____ I agree to donate 40% of my gross sales to Disciples CDC.

_____ I agree to donate 30% of my gross sales to Disciples CDC and will work a three hour shift during the sale.

I will receive the remainder of my proceeds approximately 2 weeks after the sale.

I agree to pick up any unsold items on Saturday, November 10th of the sale between 12:00 and 12:30 pm. Any unclaimed items will be donated to a charity selected by DCDC.

Signature : _____ Date : _____

_____ Pick up _____ Donate

Wednesday _____

Thursday _____

Friday _____

Saturday _____

Total Sales _____

Subtract % () _____

Total Amount Due _____