BIDDER NUMBER:_____

# DANBURY AREA AQUARIUM SOCIETY

## BIDDER AUCTION FORM

**NAME:**_____

**STREET:**_____

**CITY, STATE, ZIP:**_____

**TELEPHONE:**_____

**CLUB AFFILIATON:**_____

**E-MAIL ADDRESS:**_____

Please complete all information and print clearly…thank you.

| LOT# | DESCRIPTION | QTY | 50/50 | DONATION |
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**PAGE:**_____ **Signature:** _____