[Event name] Silent auction bid sheet

Item name:		**Item number:**	
Description:			
Donated by:			
Value:	**$**		
Minimum bid:	**$**		
Bid increments:	**$**		

Bid	Name	Phone number
$		

☐ Paid **Method of payment:** ☐ cash ☐ credit ☐ cheque Volunteer initial: _____

Proceeds support: Alzheimer Society of B.C. Charitable Registration BN #11878 4891 RR0001