

Date: _____ **DROP N RUN SLIP**

Name: _____

Address: _____

Phone: _____

Please Note: On this drop-off, Any items we can not take on consignment, will be donated to charity. Please sign if you agree and have read our contract & FAQ on our website.

Signature

(Please use back of this paper if there are any notes that you would like to give to our processing department.)

THIS SECTION BELOW IS FOR OFFICE USE

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