



Sammamish Kiwanis Ski & Sports Swap Sign-In / Inventory Sheet



Name: _____ Vendor #: _____
 Address: _____ Phone #: _____
 _____ E-Mail: _____

Percentage of sales donated to Sammamish Kiwanis*: 25% (minimum) 100% other _____%

I would like to donate my unsold merchandise to Sammamish Kiwanis

Item #	Item Description (Include brand, length, size, color)	Price	Sold
Skis/Boards	1 _____	\$ _____	<input type="checkbox"/>
	2 _____	\$ _____	<input type="checkbox"/>
	3 _____	\$ _____	<input type="checkbox"/>
	4 _____	\$ _____	<input type="checkbox"/>
	5 _____	\$ _____	<input type="checkbox"/>
Boots	6 _____	\$ _____	<input type="checkbox"/>
	7 _____	\$ _____	<input type="checkbox"/>
	8 _____	\$ _____	<input type="checkbox"/>
	9 _____	\$ _____	<input type="checkbox"/>
	10 _____	\$ _____	<input type="checkbox"/>
Other	11 _____	\$ _____	<input type="checkbox"/>
	12 _____	\$ _____	<input type="checkbox"/>
	13 _____	\$ _____	<input type="checkbox"/>
	14 _____	\$ _____	<input type="checkbox"/>
	15 _____	\$ _____	<input type="checkbox"/>
	16 _____	\$ _____	<input type="checkbox"/>
	17 _____	\$ _____	<input type="checkbox"/>
	18 _____	\$ _____	<input type="checkbox"/>
	19 _____	\$ _____	<input type="checkbox"/>
	20 _____	\$ _____	<input type="checkbox"/>

I hereby release Sammamish Kiwanis and PLCC from any responsibility for injury or loss of property regarding this sale

X _____

PLEASE RETURN TODAY BETWEEN 2:30 -- 4:00 PM TO CHECK OUT AND CLAIM ANY UNSOLD MERCHANDISE
Any items remaining after 4:00 pm will become the property of Sammamish Kiwanis

*Sammamish Kiwanis Foundation is a 501(c)3 organization – Tax ID# 27-2034872

www.sammamishkiwanis.org

For Sammamish Kiwanis Treasurers Use only:

Total Amt. Sold: _____ **Less % to Kiwanis** _____ **Amt Pd** _____ **Ck #** _____ **Cust. Init.** _____