



Account No. _____ Ticket Date _____

Name _____

Intake Date _____ Page _____ of _____

INTAKE ITEMIZED PRICE LIST

Office Use Only Category	Item	Brand	Qty	Description	Comment	Legacies Price
	1.					
	2.					
	3.					
	4.					
	5.					
	6.					
	7.					
	8.					
	9.					

As stated in Consignment Contract, if items do not meet Legacies' minimum price point, they are considered donated.

Consignor's Signature _____

Intake By _____ Date _____

Pricing By _____ Date _____

Ticketing By _____ Date _____

Tagging By _____ Date _____

Cleaning Fee(\$48/hr): _____

After 30 Days, 15% Discount
By Day 60, Reclaim or Donate