



VINO DE SUEÑOS

SILENT AUCTION BID FORM

Item: _____ Bid: \$ _____ **

Bidder Name: _____

Card Type: __ Visa __ Master Card __ AmX __ Other: _____

Card #: _____ Exp. Date: _____

Name on Card: _____ CWV: _____

Billing Address: _____

Shipping Address (If different than Billing):

**** NOTE: BID PRICE MUST EXCEED PUBLISHED STARTING BID**