



McPherson Opera House Resale and Consignment
217 South Main Street
McPherson, Kansas 67460
620-241-1952 ext. 217

Consignment Date: ____/____/____

Expiration Date: ____/____/____

Consignor	
Name: _____	Phone: (____) _____
Address: _____	City: _____ State: _____
Email: _____	Zip: _____

Consignment Agreement

1. The above referenced (consignor) authorizes the McPherson Opera House Resale and Consignment (consignee) to sell and liquidate all of the items listed below in this agreement.
2. Consignment period is for 120 days. Consignor receives 50% of the selling price.
3. Consignments are subject to a 10% reduction after the first 30 days the items are on the showroom floor and by the same amount in subsequent 30 day periods.
4. The original consignment price will be mutually agreed upon by the consignor and consignee. If no price is determined, the consignee will establish the price. Clothes will not be considered for consignment. The consignee may decline any item.
5. No item will be taken for consignment unless the value is \$50.00 or more.
6. The McPherson Opera House Resale and Consignment can pick-up items for a \$50.00 fee and the fee is payable at the time the item is picked up.
7. Consignments will be paid at the end of the consignment period or within 30 days of the sale of the last item, whichever is sooner.
8. **At the consignment expiration date any unsold items that have not been picked up become the sole possession of the McPherson Opera House (MOH) Resale. The MOH Resale and Consignment has the right at that time to dispose of items at their discretion. The consignor will not be notified prior to this action.**
9. The MOH Resale and Consignment is not responsible for damage to, theft, fire, or any type of loss of consigned goods.
10. As the sole owner of the items described in this agreement, the consignor is within his/her legal rights to consign these items. By signing this agreement, the consignor has read, understands, and fully agrees to the terms and conditions of this agreement.

_____ Consignor Signature	_____ Date	_____ Consignee (MOH) Signature	_____ Date
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Please include item descriptions on back of form -->

	Item(s) with brief description	Starting Price	Sold Price	Date Sold	MOH Staff - Consignor Payment
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					

Additional Notes:
