



Bidder # _____
For Office Use Only

PROXY BID / ABSENTEE BID FORM

SALE DATE: _____

NAME OF AUCTION: _____

BIDDER INFORMATION

Company Name: _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Phone No.: () _____

Fax No.: () _____

Contact Name: _____

LOT #	DESCRIPTION	BID PRICE
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Total Price: _____ (Excluding Buyer's Premium)

Deposit: _____ (25% of Bid Price)

Signature: _____

To place an absentee bid you authorize the auctioneer to bid on your behalf up to the limit of your bid. He will try to make the purchase at the lowest possible price below your maximum bid. All sales are final. Please call the auction office after the auction to see if your bids were successful and to arrange for prompt payment and removal.

FOR ADDITIONAL TERMS SEE AUCTION CATALOG
Please read the terms of each individual sale for the most accurate information.
FAX THIS FORM TO: 215-634-0496