

Proxy Bid Form

Date:	BIDDER #			
AUCTION NAME:				
Company Name:				
Contact Name:				
Address:				
Phone:	Fax:			
E-mail:				
Lot #	Description	Serial #	Bid Amount	
for the sole purpose of	appoints Asset Services to act as my agent and proxy purchasing the above listed asset(s) on my behalf. I	Subtotal		
acknowledge that I have read and will abide by the Auction, Event Specific and Removal Terms and Conditions set forth in the Auction Catalogue, and further acknowledge and agree that the purchase of the asset(s) will be made in accordance with those Terms and Conditions. Terms and Conditions may be amended by the Auctioneer on the day of sale.		Buyer's Premium		
		Total Bid		
The undersigned acknowledges that applicable sales taxes will apply to the total amount bid.		Deposit (minimum of 25% of Bid)		
Cheque w/ Bank	Card #	cvc	# Expiry	
Letter of Guarantee	Visa			
Wire Transfer	Mastercard			
Card Holder Nan	1e (as it appears on card):			
Authorized Signa	ature:			