

AGENT RELEASE AUTHORIZATION FORM

I hereby authorize Paul McInnis LLC to release the following lots purchased by me as listed on my invoice to the Authorized Agent listed below. I agree not to hold Paul McInnis liable for any loss or damage to the property once it has been released to the Authorized Agent.

Bidder Number:	Auction Na	me/Date:		
Name:				
Company Name (If Applic	able):			
Address:				
City:		State:	Zip Code:	
Phone:	Email:			
Signature:			Date:	
Lot Numbers:				
Authorized Agent's Name	:			
I have received the above kind will be considered aft			ledge that no shortages or claims on site.	of any
Authorized Agent (Signatu	ıre):		Date:	
Print Name:				
Please complete and serv	this authorization	on form to D	aul Melania I.I.C	

Please complete and send this authorization form to Paul McInnis LLC Email: <u>katy@paulmcinnis.com</u>

