

I understand and agree to the Terms and Conditions of Sale^o

SIGNATURE

175 EAST 87TH STREET DOYLE.COM

Consumer Affairs No. 0777006

ABSENTEE & TELEPHONE BID FORM

5.22
* Name and address must agree with resale certificate, if applicable. Invoices cannot be changed once registered.
** If you are using a cell phone for bidding, a safety bid is required in case of lost connection
 Absentee bidding is a service provided with the understanding that Doyle New York shall not be responsible for errors and/or omissions. Changes to bids on the day of sale must be submitted in writing by fax or email.
 Absentee bids are executed in competition with the audience, on an alternate basis. Due to the uncertainties of bidding patterns, a lot may sell to the audience for the same amount or slightly less than your bid. To avoid this possibility, you may authorize us to increase your bid by one increment by placing a plus sign (+) beside the maximum bid.
• In the event that identical bids are submitted, the earliest will take precedence.
• A Buyer's Premium, as stated in the Conditions of Sale, will be added to the hammer price.
 Buyers unknown to Doyle New York are advised to arrange payment or supply credit references in advance of the sale date. Otherwise, purchases cannot leave our premises until checks have cleared.
• A 25% deposit may be required on certain absentee bids.
 Lot descriptions do not include damage, repairs or restoration to items. The absence from the description of any such notes must not be taken to imply that the lot is in perfect condition. Condition reports are provided upon request.
• Successful bidders should make arrange ments to have their purchases removed from the premises no later than 4:30pm or the day following the sale.
 Terms and Conditions of Sale may be viewed in the catalogue, on our Web site and in our salesroom.
PIDDING INCREMENTS (The quetioned)

	ate the type of bid you are su	bmitting. Pleas	se check one:		
_	PHONE BID				
BIDD	ate in what capacity you are b ING AS A PRIVATE ING ON BEHALF O	BUYER			
SALE TITLE			SALE DATE		
NAME*					
COMPANY	(If applicable)				
ADDRESS*. ☐ Change of					
CITY			STATE	_ZIP CODE_	
COUNTRY					
PHONE					
PHONE (DA	AY OF SALE**)				
EMAIL					
CLIENT NU	IMBER				
	NTS: Please provide Passport	number, US Dr	iver's Li cense, or Visa or Maste	erCard with exp	irati on date)
LOT NUMBER	TOP LIMIT OF BID / SAFETY BID Excluding Buyer's Premium	LOT NUMBER	TOP LIMIT OF BID / SAFETY BID Excluding Buyer's Premium	LOT NUMBER	TOP LIMIT OF BID / SAFETY BID Excluding Buyer's Premium

ING INCREMENTS (The auctioneer vary the increments at his/her discretion.) \$100 - \$500 \$25 \$1,000 - \$2,000 \$100 \$10,000 - \$20,000 . 4 1 20 20 20 \$1,000 \$20,000 - \$50,000 \$2,500 \$50,000 - \$100,000 - 274 - 274 \$5,000

Submit bid form by email: Bids@DOYLE.com or FAX 212-427-7526 by 4PM (Eastern) the evening before the auction.