ABSENTEE BID FORM

For those unable to attend the auction, **Hash Auctions** offers the absentee bid service as a convenience to our patrons. Hash Auctions will not he held responsible for error or failure to execute the bids. The bid must be in writing. Please email this form with signature to **to info@hashauctions.com at least one day prior to the upcoming auction**. If you have any questions, please call Hash Auctions at **540-955-0277**. Forms may also be faxed to 540-955-0975.

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	end the auction on (date) and therefore		
up to but not exce	eding the amount(s) listed. I acknowledge the following condit	lions of auction and agree to	o tne same:

Everyone leaving an absentee bid must he willing to leave his or her credit card number to assure payment of successful bids. Any illegible bids will be disregarded. Should you be the high bidder, we will accept local checks and cash for payment.

Our auctions have a 15% Buyers Premium added to purchase price for online and absentee bids.

The amount will be automatically charged to your credit card, unless other arrangements are made.

A 5.3% sales tax will be added to the sales total unless a valid tax-exempt number is on file with our office (Separate form required for tax exempt information) prior to the day of the auction. Items won at auction will need to be picked up on Tuesday or Wednesday between 9:00 am and 4:00 pm, for Monday Auctions.. All successful bids requested to be shipped to the buyer will be sent with shipping and handling costs charged to the same credit card. Successful bidders will be called the next business day after the auction with bid information, be sure to provide a contact number for business hours.

Bids are executed in competition with the audience on an alternate basis.

Due to uncertainties of bidding, a lot may sell to the audience for the same amount authorized by the absentee bid. To avoid possibility, the absentee bidder may authorize Hash Auctions to increase their bid by one increment by placing a (+) sign by the bid price.

COMPLETE OTHER SIDE

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December

NAME:		
ADDRESS:		
CITY:		
DRIVERS LICENSE # (REQUIRED)		
SIGNATURE		
TAX EXEMPT – SEPARATE FORM REQUIRED F	OR THIS INFORMATION	
DAY TIME PHONE:		
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	MASTERCARD	VISA
CREDIT CARD NUMBER		
EXPIRATION DATEVCODE_		