TRI-STATE Auction Gallery
181 Bergen Boulevard, Fairview NJ 07022
www.Tri-StateAuctions.com
201-941-0500

FAX: 201-840-1993

Date_____

I desire to place the following bids for _____, 20_____ SALE. These bids are to be executed by COMPANY to but not exceeding the amount or amounts specified below. Each bid is PER LOT, as indicated, and all bids will be executed and are accepted subject to the "Conditions of Sale" and "Terms of Guarantee." **Please see** "Advice to Order Bidders" **on reverse of this bid slip and note that a premium of 20% will be added to the hammer price as part of the total purchase price.**

Name _____ Bidder #_____
(Please print or type)

Address _____
(Street) (Apt.)

_____
(City) (State) (Zip)

Telephone_____

Email _____ Signed _____

Lot Number	Item	Top limit of Bid not including 20% premium (Bid is per lot number as listed in the catalogue) $

Credit Card # _____Exp date _____Sec Code _____

If Dealer, please give resale number _____ State _____
IMPORTANT: To facilitate handling, kindly mark envelope: "Attention- Bid Department."