



Bid Form - Auction 229

Closing Tuesday June 11, 2019

Name:..... Signature:

Address:..... Suburb:

City: Postcode:

Country:.....

Special Mailing Instructions:

Phone: Email:

Please accept the following bids which are placed in accordance with the Auckland City Stamps Conditions of Sale printed in this catalogue. I wish to limit my spend to a maximum of \$..... and understand that once this limit is reached all subsequent bids will be cancelled.

Bids Under 80% Of Estimate Are Not Accepted. Prices Are In NZ Dollars. Postage & Packing Is Additional.

LOT #	LIMIT \$	LOT #	LIMIT \$	LOT #	LIMIT \$	LOT #	LIMIT \$

In the event of competition or a tie, please increase my bids by: 10% 25% 50% 100%

Space For More Bids Is Provided On The Back Of This Page

Method of Payment

If successful, please charge my: VISA MasterCard Amex

Or please send an invoice and I will pay within 7 days of receipt

Card number Expiry Date.....

Cardholder Name: Cardholder Signature:

