

JOHN MORAN
S I N C E 1 9 6 9
A U C T I O N E E R S

Release Authorization

FILL OUT THIS AUTHORIZATION AND RETURN to info@johnmoran.com or 626.798.2079 (f).

Note: items will not be released without a signed authorization from the invoiced buyer.

Payment in full must be made before property is released.

Name on Invoice: _____ Buyer #: _____

Company Name: _____

Phone: _____ Email: _____

I authorize: _____ to pick up lots from
(please specify shipping company or third party and their contact number)

Sale date: _____ Lot # (s): _____

Expected date of pick up _____ Approximate time: _____

Make this my default shipper until further notice.

For more information regarding the collection of property please see our Condition of Sale

Signature: _____

Date: _____

Print Name: _____

Date Paperwork Prepared _____ Date Shipped _____
(Office Use Only)