

ABSENTEE BID FORM

SALE DATE

BILLING NAME

ADDRESS

CITY

PROVINCE/STATE, COUNTRY

POSTAL CODE

E-MAIL ADDRESS

DAYTIME TELEPHONE

EVENING TELEPHONE

FAX

CELLULAR

I request Heffel Gallery Limited (“Heffel”) to enter bids on my behalf for the following Lots, up to the maximum Hammer Price I have indicated for each Lot. I understand that if my bid is successful, the purchase price shall be the Hammer Price plus the Buyer’s Premium calculated at a rate of twenty-five percent (25%) of the Hammer Price of the Lot up to and including \$25,000; plus twenty percent (20%) on the part of the Hammer Price over \$25,000 and up to and including \$5,000,000; plus fifteen percent (15%) on the part of the Hammer Price over \$5,000,000, plus applicable Sales Tax. I understand that Heffel executes Absentee Bids as a convenience for its clients and is not responsible for inadvertently failing to execute bids or for errors relating to their execution of my bids. On my behalf, Heffel will try to purchase these Lots for the lowest possible price, taking into account the Reserve and other bids. If identical Absentee Bids are received, Heffel will give precedence to the Absentee Bid Form received first. I understand and acknowledge all successful bids are subject to the *Terms and Conditions of Business* printed in the Heffel catalogue.

I agree to receive e-mails from Heffel. You can withdraw consent at any time. Your consent is sought by Heffel, on its own behalf and on behalf of Galerie Heffel Québec Ltée.

SIGNATURE

DATE

DATE RECEIVED (FOR OFFICE USE ONLY)

CONFIRMED (FOR OFFICE USE ONLY)

Please view our *General Bidding Increments* as published by Heffel.

Lot Number	Lot Description	Maximum Bid
numerical order	artist	Hammer Price \$ CAD (excluding Buyer’s Premium)

- 1
- 2
- 3
- 4
- 5
- 6

To be sure that bids will be accepted and delivery of Lots not delayed, bidders not yet known to Heffel should supply a bank reference letter at least 48 hours before the time of the auction. All Absentee Bidders must supply a valid MasterCard or Visa # and expiry date.

MASTERCARD OR VISA #	EXPIRY DATE
NAME OF BANK	BRANCH
ADDRESS OF BANK	
NAME OF ACCOUNT OFFICER	TELEPHONE

I authorize the above financial institution to release information to Heffel and to discuss with them particulars of my financial condition and typical transactions conducted.

SIGNATURE DATE

To allow time for processing, Absentee Bids should be received at least 24 hours before the sale begins. Heffel will confirm by telephone or e-mail all bids received. If you have not received our confirmation within one business day, please re-submit your bids or contact us at:

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