

2100 Stonington Avenue, Hoffman Estates, Illinois 60169 847-380-9819

Authorization of Release

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Auction Name:	Auction Date:
•	rial, Inc. to release any items purchased by me (as ne person(s) or companies listed below:
limited power of attorney to executimited to, invoices, bills of lading	named Authorized Agent to act as my attorney-in-fact with cute on my behalf any and all documents, including by not g, terms and conditions, and shipping manifests, with respect d removal of the referenced items from the above named lustrial, Inc.
Invoice #:	Lot #'s:
Buyer Company Name:	
Buyer Name:	Buyer Title:
Buyer Phone:	Buyer Email:
Authorized Agent Company:	
Agent Name:	
Authorized Agent Phone:	Authorized Agent Fax (optional):
Item Pick Up Date:	
Buyer's Signature Authorization	: