

PROXY BID REQUEST FORM

DONOR INFORMATION		BIDDER #
Name		(assigned by Auction office
Business (if applicable)		
Billing Address		
City	StateZIP_	
Phone (Home)	(Business)	
Email		
Visa \square MC \square Amex \square Acct #	Exp Date	_/CVV
PLEASE INDICATE THE PRO	XY BIDS YOU WOULD LIKE MADE	ON YOUR BEHALF
Item Description	Maximum Bid \$	Item #
		(assigned by Auction office)
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		(assigned by Auction office)
Item Description	Maximum Bid \$	
		(assigned by Auction office)
Item Description	Maximum Bid \$	Item #
 place bids on your behalf for the follow bid amount you indicate. Bids placed bids will increase in increments set by If your proxy bid is the highest at the owill be deemed the winning bidder, an An email confirmation will be sent to y successful bidder. 	close of the auction on Saturday, March 11, 2023, you ad agree to pay the amount due in full. you no later than Monday, March 13, 2023 if you an same item, the proxy bidder who submitted the sign	timum dder #. ou re the
Signature	Date	
Signature	Date	

Please return this form to sabina@catlin.edu or Catlin Gabel Auction Office, 8825 SW Barnes Rd, Portland, OR 97225