

Bud Haynes & Co. Auctioneers Ltd.

Auctioneers: Bud & Dot Haynes, Linda & Jim Baggaley

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G.S.T. #R100685296

Although we should really like to have you at the Auction, we understand that circumstances do not always permit you to attend. In this case, we will try to help in every way, but there are certain limitations and problems for us in this matter.

If you will note the conditions and are willing to abide by them, we would be more than pleased to try and accommodate you and wish you every success in your bidding.

1. BUD HAYNES & CO. is hereby authorized to bid on the following lots on my behalf, up to the price stated. BUD

HAYNES & CO. will try to obtain the item as reasonably as if I were bidding myself, using "reasonable" increments

as indicated in the "Increment Table" in this document.

2. BUD HAYNES & CO. assumes no responsibility for failure to execute these bids for any reason whatsoever.

3. I agree that if my bid is successful the purchase price will be the aggregate of the final bid and a

of the final bid, together with any taxes due thereon. BUD HAYNES & CO will make one telephone call telling you what you won the bid on, then it will be automatically put on your card. Shipping/handling, taxes, etc. are the responsibility of the purchaser. BUD HAYNES & CO will now charge a

per firearm (plus S/H) which will be charged to your credit card upon shipping completion.

4. The bidder will telephone the following day to confirm auction results and make arrangements for immediate payment

and removal.

5. All bids will be treated as offers made subject to the "Conditions of Sale."

6. These bids will not be executed unless this form is signed.

0-100 \$ 10 INCREMENTS 2,000-5,000 \$ 250 INCREMENTS

100-500 \$ 25 INCREMENTS 5,000-10,000 \$ 500 INCREMENTS

1,000-2,000 \$ 100 INCREMENTS 10,000-20,000 \$ 1,000 INCREMENTS

SALE

NUMBER

AUCTION (LOT)

NUMBER

DESCRIPTION OF LOT

BID \$

Please execute these bids on my behalf.

Signed _____

PLEASE PRINT CLEARLY

Surname _____ First Name _____ Middle Name _____

Telephone no. _____ FAX _____

Address _____

City _____ Prov/state _____ Postal/zip code _____

FAC, PAL, DEALER'S NO. _____ EXPIRY DATE _____

Driver's License _____ Place & Date of Birth _____

Name of Shooting Club _____

MASTERCARD OR VISA NUMBER IS REQUIRED, WITH NAME AS IT APPEARS ON CARD AND EXPIRY DATE.

MASTERCARD _____ **VISA** _____

Name _____

Number _____ Expiry date _____