

AUTHORIZED RELEASE FORM

Buyer Name (as invoiced):	
Phone:	E-mail:
Auction name & Auction Date:	
Lot #:	
l authorize	
	CTION GALLERY USA. (please specify shipping company,
franchise location or 3rd party)	
Authorized Agent's Signature :	
Authorized Agent's Print Name :	
Date:	·

❖ Invoice payments by check and wire transfer may result in processing delays. Payments must be posted to your account before property is released.

Please provide the shipping agent or 3rd party with the appropriate **CALIFORNIA ASIAN ART AUCTION GALLERY USA** location and fax this form to the correct location:

3380 Flair Dr., Ste# 113-116, El Monte, CA 91731

Tel: 888-977-9588 or 626-281-9588 Fax: 888-859-4378 or 626-289-7861 E-Mail: info@californiaasianartauction.com Website: http://www.caa-auction.com

Items will not be released without a signed authorization from the invoiced buyer.