

SKINNER AUTHORIZED RELEASE FORM

Print Buyer name as invoiced: _____

Check enclosed \$ _____

PICK-UP/SHIPPING INSTRUCTIONS

Customer to pick-up

Agent or independent shipper to pick-up

I authorize _____

to pick-up items from Skinner for Auction# _____

lot/lots# _____

Signature _____

Please print name _____

phone _____ email _____

Please provide the shipping agent with the appropriate SKINNER gallery location and fax this form to the correct location

SKINNER Boston
63 Park Plaza
Boston, MA 02116

617.350.5400
617.350.5429 (fax)

SKINNER Bolton
357 Main Street
Bolton, MA 01740

978.779.6241
978.779.5144 (fax)