

Hope Awards Dinner Live Auction - Proxy Bid Form

BIDDER CONTACT INFOR	MATION	
Name:		
Email:		
Street Address:		
City/State/Zip:		
Cell phone:		
MY BIDS:		
Item Number	Item Description	Maximum Bid Amount
	l.	<u> </u>
PAYMENT INFORMATION	N	
Visa/MasterCard/Americ	an Express Number:	
Expiration:	Security Code:	
TERMS & CONDITIONS		
	this form, I authorize a representative assigned by Ca	-
-	f for the above items, up to and including the maximu	
designated on this form. Bids placed on my behalf will increase in increments set by the auctioneer. If my proxy bid is the highest made at the Live Auction on May 16, 2018, I will be deemed the winning bidder,		
and I authorize my credit card above to be charged within 24 hours of the event. I understand I will receive		
email confirmation on May 17, 2018 and written confirmation within 14 days if I am the winning bidder. I		
will arrange to pick up my items at Calvary Women's Services within 10 days of the Live Auction. Shipping		
expenses will be the sole responsibility of the purchaser. I understand that if two proxy bids tie for the		
	bidder who submitted her or his proxy bid form first w	
are final; no refunds or exchanges will be made. Calvary Women's Services is not responsible for failure or other inadvertent errors relating to the execution of my bids.		
other madvertent en ors	cidents to the execution of my blus.	
AUTHORIZATION		
Signature:	Date:	

This form must be received by Calvary Women's Services by <u>May 15, 2018 at 5:00 PM</u>. EMAIL TO: hlaing@calvaryservices.org

MAIL TO: Calvary Women's Services, 1217 Good Hope Road SE, Washington, DC 20020