

AGENT RELEASE AUTHORIZATION FORM

I hereby authorize Paul McInnis LLC to release the following lots purchased by me as listed on my invoice to the person or company listed below (Authorized Agent).

Bidder Number: _____ Auction Name/Date: **The Lessard Estate, October 7, 2025**

Your Name: _____

Company Name (If Applicable): _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Email: _____

Signature: _____ Date: _____

Lot Numbers: _____

Authorized Agent's Name: _____

I have received the above referenced lots and acknowledge that no shortages or claims of any kind will be considered after the goods leave the auction site.

Authorized Agent (Signature): _____ Date: _____

Please complete and send this authorization form to Paul McInnis LLC
Fax (603) 964-1302 or email: admin@paulmcinnis.com