## **AGENT AUTHORIZATION**

If you wish to be represented by an agent in the purchase of any lot in this sale, please complete this form and return it to the sales company

NO LATER THAN 5 DAYS prior to the sale.

Please mail form to:	Date:	
Los Alamitos Equine Sale Co., LLC		
P.O. Box 919		
Los Alamitos, CA 90720		
I hereby authorize and appoint		
		to bid and execute
Acknowledgments of Purchase on n to be conducted on October 6th and		
Further, this agent is authorized to a for all expenses including, but not li fees, stabling, veterinary fees and tra	mited to, purchase p	-
I have read the Conditions of Sale a said terms and conditions on any pu		_
Signature:		
Printed Name:		
Address:		_
City:	State:	Zip:
Send completed form to:LAESC, Para: 714-236-1761 e-mail: office@		amitos, CA 90720
Subscribed and sworn to before me or	n thisday of	, 20
NOTARY PUBLIC		
State of	County of	
My Commission Expires:		