

BIDDER REGISTRATION FORM

Dealers: Billing name and address should agree with your state or local sales tax exemption certificate. Invoices cannot be changed after they have been printed.

Return Form to:  
Dorothy Sloan—Rare Books  
P.O. Box 4825, Austin, Texas 78765-4825  
Phone: (512) 477-8442; Fax: (512) 477-8602

Name \_\_\_\_\_

Signature \_\_\_\_\_

[Firm or Institution] \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zipcode \_\_\_\_\_

Telephone (day) \_\_\_\_\_ (evening) \_\_\_\_\_ (Cell) \_\_\_\_\_

Fax \_\_\_\_\_ e-mail \_\_\_\_\_

Driver's License no. \_\_\_\_\_ state \_\_\_\_\_ Date of Birth \_\_\_\_\_

Tax Exempt / Resale no. \_\_\_\_\_

Collecting interests and/or comments \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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Bank reference:

Bank Name \_\_\_\_\_ Telephone \_\_\_\_\_

Address \_\_\_\_\_ -Fax \_\_\_\_\_

Acct. No. \_\_\_\_\_ Acct. Officer \_\_\_\_\_

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