

Grays Third Party Authority Form

l,				authoris	se
(Account	Holder's Name)				
(Third Pa	ty Agent / Courier Comp				
to collect				on my behal	f.
	(Invoice Number/s)				
	quired Documents:				
	canned copy of the acco copy of your Winner's e			r valid photo ID	
Only goo	ds listed on this authorit	will be released to you	r selected third-p	party agent.	
Signature	:				_
Signature	:				_
	:can be added in the box				_
					_
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					_
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