

SALES REPORT FORM

Contact MLS® - Sales Tel: 604-730-3037 or 604-730-3034 Fax: 604-730-3100 Email: sales@rebgv.org

TO BE COMPLETED BY LISTING BROKERAGE ONLY

YOUR REF. NO.:		MLS ® NUMBER:	
PROPERTY ADDRESS:		CITY OR MUNICIPALI	TY:
OFFER ACCEPTANCE I	DATE:	SUBJECT REMOVAL DATE:	
COMPLETION DATE:		UNCONDITIONAL OFFERYES OR NO:	
LISTING BROKERAGE	ID#:		
LISTING AGENT:	Surname	First Name	ID#
BUYER AGENT'S BROKERAGE:		BUYER AGENT'S BROKERA ADDRESS:	AGE
BUYER'S AGENT:			
BUYER'S AGENT:	Surname	First Name	ID#
BUYER'S AGENT:	Surname	First Name	ID#
DOTER S AGENT.	Surname	First Name	ID#
SELLING PRICE:		BUYER'S POSTAL CODE:	
		sales must be reported to Ri	
REPORTED BY:		PHONE:	FAX:
ALL SALES PRICES M	<u>UST</u> BE REPORTED EX	CLUSIVE OF TAXES.	
		MANAG	ER'S SIGNATURE