

You may fax your contract attached with this case sheet to the office: (888) or (540) 341-8924
RE/MAX Regency Sales Case Sheet

Address: Street # _____ Street Name _____ Apt # _____ City _____ State _____ Zip Code _____
 Commission: Listing _____ % Selling _____ % Offer Date: _____ **Ratification Date** _____
 Close Date: _____ Sell Price: \$ _____ MLS#: _____
 Selling Type: Residential Commercial Land Farm Referrals

SELLER
 Source Type: (Choose One from Bottom): _____
 Buyers: Name: _____
 Sellers: Name: _____
 Sellers Address: _____
 Home phone#: _____ Work phone #: _____
 Cell Phone #: _____ Email: _____

BUYER
 Source Type: (Choose One from Bottom): _____
 Buyers: Name: _____
 Buyers Address: _____
 Home phone#: _____ Work phone #: _____
 Cell Phone #: _____ Email: _____

AGENT INFO
 Listing Company/ Location: _____ / _____
 Listing Agent: _____
 Selling Company/ Location: _____ / _____
 Selling Agent: _____

VENDOR
 Entitle Settlements **Other**
 Seller's Closing Co/Location: _____ / _____
 Main Office phone# _____ Contact _____
 Entitle Settlements **Other**
 Buyer's Closing Co/Location: _____ / _____
 Main Office phone# _____ Contact: _____
Mortgage Company: _____ / _____
 Main Office phone#: _____ Contact: _____

Please fill out the Commission for our office only. (Not the other Brokers Agent)

Escrow Amount: \$ _____ **Company Holding:** _____

Total Commission: (Listing Side) \$ _____ (Selling Side) \$ _____

Admin Fee: \$ _____ **Bonus** \$ _____ **Rebate** \$ _____
 (Credit to Client, Warranty Paid, etc.)

Do you have Direct Deposit Yes No
Commission split (If splitting with another agent in office) : From: Listing side or Selling side
 \$ _____ Amount

Referral Company to be paid: _____ Agent: _____ ***Tax ID#** _____

Address: Company Name _____
 Street # _____ Street Name _____ City _____ State _____ Zip Code _____
 Main Office phone: _____ % or Referral Fee: _____

Deductions: CMN: \$ _____ Susan G. Komen Breast Cancer: \$ _____
 Panquier Habitat For Humanity: \$ _____ *RE/MAX Convention: \$ _____
 *Office Expenses: \$ _____

*Source: Newspaper Advertising/RE/MAX Sign/Repeat Business/Personal Lead/ Other Broker/ Office Walk in/ RE/MAX Relocation/
 Canvass-Direct Mail/ Canvass-Door/ Canvass-Phone/Open House/ Clubs/ Misc./Web-Site/ Billboard Advertising/ Referral*

- The following forms are Required for Processing**
- MRRIS Agent Full Listing Print out.
 - Regional Sales Contract (Ratification Date On Page 10 of contract)
 - Copy of Escrow check or Check if we are holding
 - VA Jurisdictional Addendum
 - Disclosure of Brokerage
 - Affiliated Business Disclosure
 - Excl. Right to Represent Buyer Agreement (IA)
 - Dual or Designed Agency Forms (If Applicable)
 - Disclaimer/ Disclosure Statement