Ohio Sheriff Sales REALTOR BUYER REFERRAL REGISTRATION FORM Print this form and fax to 1.877.772.4217 or email to timlileauctioneer@gmail.com

Referring Licensee:	Company:	
Address:		
Phone:	Email:	
Real Estate License Number		
As a licensed real estate B	roker/Salesperson, I wish to re	egister the following client:
Registrant Name:		
	Email:	
<u>-</u>	only foreclosure auction of the	
2344 PO	ortage Path, Bellbrook, O	л 45305
I understand and acknowledge:		
Agency is NOT in effect. By prope	the subject real property being offered via a erly registering your bidder for this auctionative *WINNING BID should my Registration *WINN	ion, you are eligible to receive a Buye
2) I must register my bidder with this scheduled auction end time (no exce	form completed prior to their registering o eptions).	online no less than 48 hours prior to the
3) No oral registrations will be accepte	ed. Principals to the transaction are not elig	tible for fee.
THERE WILL BE NO I	EXCEPTIONS TO THESE MINI	MAL REQUIREMENTS.
In addition to my signature below have read, understand and acknowledge.	w, please find the signature of my Roowledge acceptance of the above.	egistrant, indicating that they
Referring Licensee Signature:		Date
Registrant Signature:		Date
Private Selling Officer Acknowled	dgment Date	SHERIFF