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: | C | Company: | |
|--|------------------------------------|----------------------------|---|
| Address: | | | |
| Phone: | Em | ail: | |
| Real Estate License Number | | | |
| As a licensed real estate B | roker/Salespersor | ı, I wish to regis | ter the following client: |
| Registrant Name: | | | |
| Address: | | | |
| Phone: | | | |
| For the upcoming online-o | only foreclosure at | ıction of the follo | owing subject property: |
| 4144 N. Ken | np Road, Lima (Am | ierican TWP), Ol | nio 45807 |
| I understand and acknowledge: | | | |
| 1) As this is a foreclosure action with a Agency is NOT in effect. By prop Referral Fee equal 1% of my Registral close on the transaction. | erly registering your bide | der for this auction, y | ou are eligible to receive a Buye |
| 2) I must register my bidder with this scheduled auction end time (no exc | form completed prior to teptions). | heir registering online | no less than 48 hours prior to the |
| 3) No oral registrations will be accepted | ed. Principals to the transa | action are not eligible fo | or fee. |
| THERE WILL BE NO | EXCEPTIONS TO T | <u>HESE MINIMAI</u> | REQUIREMENTS. |
| In addition to my signature belo have read, understand and acknowledge | | | rant, indicating that they |
| Referring Licensee Signature: | | | _ Date |
| Registrant Signature: | | | _ Date |
| | | | |
| Private Selling Officer Acknowle | dgment | Date | SHERIFF |