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 register the following o	client:
Registrant Name:		
Address:		
Phone:	Email:	
For the upcoming online-	only foreclosure auction of the following subject pro	perty:
1024 Ba	rbee Road, Ray (Jackson TWP), Ohio 45672	
I understand and acknowledge:		
Agency is NOT in effect. By prop	the subject real property being offered via a judicial sale process under Coerly registering your bidder for this auction, you are eligible to receive rant's *WINNING BID should my Registrant be the successful bidder, p	ve a Buye
2) I must register my bidder with this scheduled auction end time (no exc	form completed prior to their registering online no less than 48 hours peptions).	prior to the
3) No oral registrations will be accept	ed. Principals to the transaction are not eligible for fee.	
THERE WILL BE NO	EXCEPTIONS TO THESE MINIMAL REQUIREMENTS	<u>S.</u>
	w, please find the signature of my Registrant, indicating that owledge acceptance of the above.	they
Referring Licensee Signature: _	Date	
Registrant Signature:	Date	
Private Selling Officer Acknowle	dament	
rivate sening Officer Acknowle	dgment Date	