The Kelly Group Real Estate 215 N. Blaine St., Newberg, OR 97132 503-538-4531 **REFERRAL INFORMATION FORM**

SECTION 1 - RECEIVING OFFICE	SENDING OFFICE
TO: Agent:	FROM: Agent:
Firm Name:	Firm Name:
Address:	Address:
City/State/Zip	City/State/Zip:
Business Phone:	Business Phone:
Home Phone:	Home Phone:
Fax Phone:	Fax Phone:

SECTION 2 - SELLER INFORMATION				
Seller Name:	When to make initial contact:			
Address:	Property address to be listed:			
City/State/Zip:				
Business Phone:				
Home Phone:	Additional Helpful Information:			
Fax Phone:				

SECTION 3 - BUYER INFORMATION					
Buyer's Name:	New Employer:				
Address:	Address:				
City/State/Zip:	City/State/Zip:				
Business Phone:	Position and Approximate Salary:				
Home Phone:	Must home be sold first?				
Email:	Company buyout?				
Preferred Location:	Cash Available for Purchase and Closing Costs:				
Size and Type of Home Desired:	Contact Buyer at this no. first:				
	By this date:				
Price Range: \$	Expected Arrival Date: Moving Date:				
Number in Family:	Comments:				
Adults:					
Children: Age:					
Age:					
Age:					

SECTION 4 - REALTOR'S ACCEPTANCE OF REFERRAL					
Prospect's Name:	Comment:				
Date Contacted:					
Date of First Appointment:					
WE ACCEPT THIS REFERRAL, AND WHEN THE SALE IS CONSUMMATED, WE AGREE TO SEND%. (OF THE GROSS COMMISSION) REFERRAL FEE. WE WILL ENCLOSE DETAILS OF THE SALE WITH THE CHECK.					

Receiving Sales Associate Signature:	Date:	/	/	Receiving Broker's Signature:	Date:	/	/