

BROOKLYN NEW YORK MULTIPLE LISTING SERVICE

This section must be filled out completely for all transaction reports and changes

MLS # _____

Listing Office I.D. 11780 Office Name WINZONE RE Agents Name _____

Property Address _____
House # and Street Name

Report Date _____ Sellers Name _____

<u>CONTRACT</u>	<u>SOLD</u>	<u>TEMPORARY OFF MARKET</u>
Contract Date	Selling Price	Temporarily off market Date
Selling Office Name	Closing Date	Owner Signature(s) (REQUIRED)
Selling Agents Name	Selling Office NAME	
	Selling Agent's NAME	<u>BACK ON THE MARKET</u>
	Buyers Name	Back On Market Date
<u>CANCELLATION OF CONTRACT</u>	Financing Options: (circle one)	<u>LISTING EXTENTION</u>
Date	1. Conventional	New Expiration Date
	2. Cash	Owner Signature(s) (REQUIRED)
<u>LEASED</u>	3. Private	
Date	4. FHA	

Brokers Signature _____

REQUIRED FOR ALL CHANGES

Commission Change: Full Brokers Comm. _____ Selling Brokers Comm. _____

Owner signature(s) **REQUIRED** for commission changes

Price Change: _____ Asking Price Has Been Changed to \$ _____

Owner Signature(s) **REQUIRED** for price changes

REMARKS:

The above Changes in the here mentioned listing contract are effective immediately. Owner hereby Acknowledges receipt of a copy of this report in Listing Contract.