



Commission Check Request Form

Required for commission check (s) to be processed

Agent Name: _____

Prop. Address: _____

Real Estate Agent Is Representing:

____ Seller(s) ____ Buyer(s) ____ Dual Agency

____ Referral fee (Provide fully executed referral fee agreement)

Commission split with other agent(s) (If Applicable)

Agent Name: _____ Split % _____ or Flat Fee \$ _____

Cmsn. Calculation:

	Gross Cmsn.	\$ _____
Broker Fee \$ _____ + E&O Fee \$ _____ =	Tot. Broker Fees	\$ _____
	Tot. Agent. Cmsn.	\$ _____
	Tot. Agent. Cmsn.	\$ _____

Paid Through Escrow? __ YES __ NO

Transaction File: (File and all required compliance docs): ____ Submitted ____ Un-Submitted

Special instructions/Comments: _____

