



The Force Realty Referral Agreement

7251 W Lake Mead Blvd., Suite 300. Las Vegas, NV 89128

Referring Broker: _____ (Brokerage Firm Name)

Referring Agent: _____ (Associate-Licensee)

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____ Email: _____

Recipient Broker: _____ (Brokerage Firm Name)

Recipient Agent: _____ (Associate-Licensee)

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____ Email: _____

Principal: _____ (Client or Customer Name)

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____ Email: _____

Agreement: In consideration for receipt of the referral of Principal from referring Broker, Recipient Broker agrees to pay Referring Broker as follows: _____% of the total compensation earned by Recipient Broker (based upon the Principal's side of the transaction), or \$ _____, payable (through escrow, if used in principals transaction) upon recordation of deed or other evidence of transfer. If within 12 months from the date of this Agreement the Principal: ___ Buys ___ Sells ___ Leases ___ other _____ real property.

Referring Broker:

Recipient Broker:

Date: _____ License: _____ Date: _____ License: _____

Brokerage Firm: _____ Brokerage Firm: _____

Broker Signature: _____ Broker Signature: _____

Printed name: _____ Printed Name: _____

Referring Broker Tax ID# _____ (If The Force Realty ID#20-0753157)

*** A copy of the Broker's license must be provided prior to a referral being paid.***