

REFERRAL AGREEMENT

Outgoing Referral

RECEIVING COMPANY		REFERRING COMPANY	
Federal Tax ID #		Federal Tax ID # 26-3953401	
TO: Agent:		FROM: Agent:	
Company Name:		Company Name: Premiere Property Group, LLC	
		ALL REFERRALS MUST BE PAID TO CORPORATE OFFICE	
Address:		Address: 5000 Meadows Road, Suite 150	
City/State/Zip:		City/State/Zip: Lake Oswego, OR 97035	
Phone:		Phone:	
Email:		Email:	

BUYER or SELLER INFORMATION	
Client Name:	Other Notes:
Address:	
City/State/Zip:	
Phone:	
Email:	
Client Type (Buyer/Seller):	
Location:	
Price Range:	

WE ACCEPT THIS REFERRAL AND WE WILL INSTRUCT THE ESCROW COMPANY TO SEND ____% OF THE TOTAL COMMISSION DUE TO THE RECEIVING AGENT TO THE REFERRING COMPANY IMMEDIATELY UPON CLOSING ALONG WITH DETAILS OF THE SALE.

Receiving Agent

Date

Referring Agent

Date

Send Completed Form to Commissions@Premierepropertygroup.com