

Dr. Donna Grogan, Broker
WINForms® TRANSACTION COVER SHEET

BUYER/TENANT ONE INFORMATION

Buyer Name: _____ *William "Bill" Owen Byer*
Street Address: _____ *6942 Swanson Ave. #14*
City: _____ *Norwalk*
State: _____ *CA*
Zip Code: _____ *90650*
County: _____ *Los Angeles*
Home Phone Number: _____ *(562)867-4112*
Business Phone Number: _____
Fax Number: _____
Cellular Phone Number: _____
Email Address: _____ *BOB@verizon.com*

X
Check this box if you would like an "X" to appear on all signature and initial lines for **Buyer One.**

BUYER/TENANT TWO INFORMATION

Buyer Name: _____ *Barbara "Betty" Elizabeth Byer*
Street Address: _____ *6942 Swanson Ave. #14*
City: _____ *Norwalk*
State: _____ *CA*
Zip Code: _____ *90650*
County: _____ *Los Angeles*
Home Phone Number: _____ *(562)867-4112*
Business Phone Number: _____
Fax Number: _____
Cellular Phone Number: _____
Email Address: _____ *BEB@juno.com*

X
Check this box if you would like an "X" to appear on all signature and initial lines for **Buyer Two.**

SELLER/LANDLORD ONE INFORMATION

Seller Name: _____ *Oscar Ray Klient*
Street Address: _____ *14717 Burin Ave. #300*
City: _____ *Lawndale*
State: _____ *CA*
Zip Code: _____ *90260*
County: _____ *Los Angeles*
Home Phone Number: _____ *(310)397-1000*
Business Phone Number: _____ *(562)665-4545*
Fax Number: _____
Cellular Phone Number: _____ *(619)761-1212*
Email Address: _____ *ok@yahoo.com*

X
Check this box if you would like an "X" to appear on all signature and initial lines for **Seller One.**

SELLER/LANDLORD TWO INFORMATION

Seller Name: _____
Street Address: _____
City: _____
State: _____
Zip Code: _____
County: _____
Home Phone Number: _____
Business Phone Number: _____
Fax Number: _____
Cellular Phone Number: _____
Email Address: _____

X
Check this box if you would like an "X" to appear on all signature and initial lines for **Seller Two.**

WINForms® TRANSACTION COVER SHEET

PROPERTY INFORMATION

MLS Number: 45792SB
Street Address: 14717 Burin Ave. #300
City: Lawndale
Township:
County: Los Angeles
State: CA
Zip Code: 90260
Legal Description: Lot 25 Block 710 Tract No. 30051 Unit 101
Tax ID#:
Assessor's Parcel Number: 4078-005-101
Listing Date: May 17 Expiration Date: September 1
Listed Price: \$400k or Current
Balance of 1st Mortgage: \$Calculate
Balance of 2nd Mortgage: \$
Other Liens: \$
Description of Other Liens:
Total Encumbrances: \$
Homeowner Assoc. Dues: \$250.00
Property Includes: Dishwasher, Stove, and 1 Gargage Door Opener
Property Excludes: Dining Room Chandalier, Mast Bed Window Coverings
Supplemental Info: Lockbox on water pipe. Please Call Listing Agent 1st
/ VA NO-NO + closing Costs Financed
Purchase Price: \$390,000.00
Purchase Agreement Date: July 20 Closing Date: 60 Days
Deposit Amount: \$1% of PurchPrice
Deposit Amount 1st Increase: \$3% w/sgn escrow
Deposit Amount 2nd Increase: \$
Deposit Amount 3rd Increase: \$
Offer Date: July 20
Expire Date: July 22 Expire Time: 5
Offer Acceptance Date: July 25
Total Amount Financed: \$Price + VA&CC
Property Type: Residential Multi Family Vacant Land Commercial Other
Year Built:
Lot Number: 25
Unit Number: 101
Block:
Subdivision:
Plat Book:
Page Number:

ESCROW INFORMATION

Escrow Company: City Escrow Co, Inc
Escrow Number: 789ME
Street Address: 1111 Hawthorne Blvd.
City: Hawthorne
State: CA
Zip Code: 90260
Escrow Officer: Madison Estes Escrow Officer Lic. No.: 9642-3
Telephone Number: 424-1ESCROW Fax Number:
Closing Date:
Deposit One:
Deposit Two:
Email Address: me@cityescrow.com

WINForms® TRANSACTION COVER SHEET

SELLING BROKER INFORMATION

Selling Broker Firm Name: _____ *ABC Realty, Inc.* Selling Office
Street Address: _____ *5555 Hawthorne Blvd.* DRE License #: *4536271*
City: _____ *Lawndale*
State: _____ *CA*
Zip Code: _____ *90260*
Telephone Number: _____ *(310)ABC-SOLD* Selling Agent
Sales Agent Name: _____ *Larry Brown* DRE License #:
Agent's Phone Number: _____
Fax Number: _____
Cellular Phone Number: _____
Email Address: _____ *LarryBrown@ABCRealty.com*

LISTING BROKER INFORMATION

Listing Broker Firm Name: _____ *Broker Realty Inc.* Listing Office
Street Address: _____ *16007 Crenshaw Blvd.* DRE License #: *1234567*
City: _____ *Torrance*
State: _____ *CA*
Zip Code: _____ *90506*
Telephone Number: _____ *(310)660-3786* Listing Agent
Sales Agent Name: _____ *YOUR NAME HERE (RE11) (RE13)* DRE License #: *987654*
Agent's Phone Number: _____ *Your Phone #*
Fax Number: _____ *(310)660-3774* Pager: _____
Cellular Phone Number: _____ *Your Phone #*
Email Address: _____ *Your Email:*

LENDER INFORMATION

Lender Company Name: _____ *Property Lending Loan Company*
Street Address: _____ *44912 Hawthorne Blvd.*
City: _____ *Lawndale*
State: _____ *CA*
Zip Code: _____ *90260*
Telephone Number: _____ *(310)666-7142*
Lender's Officer Name: _____
Fax Number: _____
Cellular Phone Number: _____ Pager: _____
Email Address: _____ *WeGotTheMoney@PropertyLendingLoans.com*
Mortgage Type: Conv. FHA FMHA VA Other

APPRAISAL INFORMATION

Appraisal Company Name: _____ *South Bay Appraisers, Inc.*
Street Address: _____ *9641 S. Crenshaw Blvd. Suite 207*
City: _____ *Torrance*
State: _____ *CA*
Zip Code: _____ *90504*
Telephone Number: _____ *(310)WEV-ALUE*
Appraisal Officer Name: _____ *Abraham Able or (RE 40)*
Fax Number: _____ *(310)532-3111*
Cellular Phone Number: _____ *(310)532-3110* Pager: _____
Email Address: _____ *aable@sobayappl.com*

TITLE INFORMATION

Title Company Name: _____ *First Title Company*
Street Address: _____ *3844 Overview Drive*
City: _____ *Long Beach*
State: _____ *CA*
Zip Code: _____ *90808*
Telephone Number: _____ *(800)4TI-TLECO*
Title Officer Name: _____ *Ted Tuttle*
Fax Number: _____ *(562)694-5556*
Cellular Phone Number: _____
Email Address: _____ *ttuttle@firstcitytitle.com*

WINForms® TRANSACTION COVER SHEET

PEST CONTROL INFORMATION

Pest Control Company Name: Diablo Termite
Street Address: 8974 Narbonne Ave.
City: Lomita
State: CA
Zip Code: 90717
Telephone Number: (310)BUG-PEST
Fax Number: (310)FAX-PEST
Individual Representing Pete
Cellular Phone Number: _____
Email Address: Pete@BugPest.com

DISCLOSURE INFORMATION

Disclosure Company Name: Diaper Disclosure
Street Address: 941 Industry Drive
City: Irvine
State: CA
Zip Code: 92714
Telephone Number: (619)555-1212
Fax Number: (619)555-1215
Individual Representing David
Cellular Phone Number: _____
Email Address: david@ddisclosure.com

HOME WARRANTY PROTECTION INSURANCE INFORMATION

Home Warranty Protection
Insurance Company Name: Home Protection Inc.
Street Address: 123 Elm St.
City: Cerritos
State: CA
Zip Code: 90701
Telephone Number: (562)PRO-TECT
Fax Number: (562)861-4321
Individual Representing Harry Warren
Cellular Phone Number: _____
Email Address: HWarren@HomeProtection.com