

TERMINATION FORM

Mark all that apply:

Association

FMLS

FMLS Waiver

CRMLS

eKey

Close Office

NAME: _____

MLS # _____

OFFICE: _____

OFFICE # _____

eKEY # _____

The following is a breakdown of monies owed either to the Fresno Association of REALTORS®, the Fresno Multiple Listing Service, CRMLS, or the person named above:

Monies Owed \$ _____

_____ is also requesting that his/her membership with the Fresno Association of REALTORS®, Fresno Multiple Listing Service, or CRMLS be terminated and that his/her name be removed from the roster and mailing lists.

If there should be a balance owed to the Fresno Association of REALTORS®, The Fresno Multiple Listing Service, or CRMLS the undersigned agrees to pay the balance shown herein within thirty (30) days. The undersigned understands and agrees that if this balance is not paid within 30 days the matter will be turned over to the Collections Committee which has been authorized by the Fresno Association of REALTORS® and the Fresno Multiple Listing Service Directors to implement Small Claims Court action to recover these monies if necessary.

Signature: _____

Date: _____

Below is For Staff Use:

	Current Status	New Status	Effective Date
FAR			
FMLS			
CRMLS			
Co-op KEY			

Fees	Paid Y/N	Written Off	Staff Initial
FAR			
MLS			
Co-op KEY			

*Broker Written Off: Yes No