

## REAL ESTATE SOLICITATION REPORTING

Escrow No:	
Date:	
to the "Settlement Agent" 10998 information report transaction will be sent to provide the settlement identification number coul any questions regarding to	furnish your correct taxpayer identification number, and other information, as defined in Section 6045(e) of the Internal Revenue Code, for purposes of ting on real estate transactions. Accordingly, information regarding this to the Internal Revenue Service and State Franchise Tax Board. Failure to agent, United Settlement Services, with your correct taxpayer lid result in civil or criminal penalties as imposed by law. Should you have the information reporting requirements of this section, you are advised to the tax advisor or the Internal Revenue Service.
SELLER'S NAME: (enter sur	name first)
1.	
2.	
SELLER'S ADDRESS AFTER C	CLOSE: (enter surname first)
3. Address:	
4. City:	
5. State	6. Zip code:
TAVDAVED IDENTIFICATION	LAULAADED. (for a constant of
	NUMBER: (for name shown at line 1. above)
7. Employer Identification N	
OR	
8. Social Security Number:	
	ALLOCATION FOR MULTIPLE TRANSFERORS
share of "Gross Proceeds" fo	insferors/sellers in this transaction, you can choose to allocate your individual or 1099S reporting. (i.e. 50% share or interest) Transferors who are husband sing, may be treated as a single transferor. Complete one of the following
For 1099S reporting purpose	s, the allocation to be used on my behalf in this transaction is:
(a) % share o	f the total gross proceeds
OR	
(b) The amount of \$	

NOTE: If, at the closing, there is an unresolved conflict of the a/location between multiple transferors or the combined allocations do not total 100% of the reportable gross proceeds, the settlement agent must report the entire gross proceeds for EACH transferor on each return of information required to be filed. No subsequent corrections or amended 10995 forms will be issued to the transferors under these conditions.

## **REAL ESTATE REPORTING SOLICITATION**

(Continued)

## **CERTIFICATION:**

Under penalties of perjury, I/we certify that the number shown on this form is my correct taxpayer identification number.

IN WITNESS WHEREOF, the undersigned have executed this docur	ment on the date(s) set forth below.
Signature	Date
Print Name	
Signature	Date
Print Name	