

REFERRAL AGREEMENT BETWEEN LOCAL COOPERATING BROKERS

(For referrals outside of the Chicagoland market area, use the Outgoing Referral Form.)

This referral agreement is made	e between the followir	ng parties:	
Baird & Warner located at (add	ress):	Phone:	
Cooperating Brokerage:		Phone:	
Cooperating Brokerage Addres	s:		
The parties above herby agree	as follows:		
1. The broker sending the re	erral is:		
2. The broker receiving the re	eferral is:		
3. The referred transaction p	rincipal is:		
Name:		Phone:	
Address:	Email:		
5. Referral Termination Date: ACCEPTED AND AGREED AS Baird & Warner Broker Associa	OF THE DATE BELO		
Print Name		Print Name	
Signature	Date	Signature	Date
Baird & Warner Designated Managing Broker		Cooperating Designated Managing Broker	
Print Name		Print Name	
Signature	 Date	Signature	Date
Tax ID #			