

TRI-COUNTIES ASSOCIATION OF REALTORS®

Request for Refund of M.L.S. Fees

ATTN: Accounting Department

I, _____, have cancelled my M.L.S subscription
(PLEASE PRINT NAME CLEARLY)

with your association and I am requesting a refund for the fees I have already paid. I

understand that the monies will be refunded to me only if applicable.

Please send refund to: _____
(Print Street Address)

(City) (State) (Zip)

Thank you!

X _____
(REQUIRED SIGNATURE)

Date _____

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