MEMBERSHIP CANCELLATION REQUEST

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WRIST INC. 1087 N MARKET ST. TROY, OH 45373 PHONE: 937-335-1117 FAX: 937-552-3198

WRIST Use Only:

Member Code_____

MLS_____

Please cancel membership and MLS services for:

Member Name:

Company Name:

Office Code:

Effective Date:

Reason for Cancellation:

- □ License Returned to the State
- □ Voluntary Cancellation
- □ No Longer With Company
- Retirement
- □ Other _____

Notice: The cancellation of service will take effect on the specified date. Cancellation must be received by the last business day of the month in order to receive credit for the next billing cycle. Any listings in the MLS are the sole responsibility of the principal broker. Any data feeds associated with the individual agent will be automatically disabled.

Principal Broker Signature and Date Required

Printed Principal Broker Name (Please Print)

Printed Principal Broker E-mail Address