



Legal Services of America

Serving Realtors & Their Clients

Invoice: **Buyer/Seller Risk Management Program**

Requested By: Real Estate Source, Inc.
1024 Iron Point Rd., Suite 1119
Folsom, CA 95630
(866) 322- 6504

Date Requested: _____ **Payment Amount Requested: \$** 74.00

Paid for by: Buyer Seller Agent

Agent's Name: _____ **E-Mail:** _____
(Benefits Packet will be e-mailed to the above address when provided)

Covered Transaction Information:

Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Client represented in this transaction? Buyer Seller

Client (s) Name: _____
Please Print **Please Print**

Signature: _____
Optional **Optional**

Mailing Address: _____ **City:** _____

State: _____ **Zip Code:** _____ **E-Mail:** _____
(Benefits Packet will be e-mailed to the above address)

Escrow Instructions: Please make check payable to **Legal Services of America**
Mail to: 7268 Murieta Drive, #805, Sloughouse, CA 95683-9998
Please provide a copy of this form with payment