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SALES TRANSACTION LIST FOR SCS APPLICATION

(SUBMIT WITH COMPLETED APPLICATION)

Applicant Name:	Page #____of____ for this Applicant
Supervising Broker:	

#	Property Address - City State, Zip	Date Closed M/D/Y	Buyer's Name	Seller's Name	Personally Completed? Y or N

#	Property Address - City State, Zip	Date Closed M/D/Y	Buyer's Name	Seller's Name	Personally Completed? Y or N