



Disbursement Authorization



Prepared By:		Closing Date:	
Client Name:			

Property

Address:			
Class:	Single Family	Multi Family	Commercial

Title Company

Title Company:			
Address:			
Escrow Agent:			
Phone		Fax:	
E-Mail:			

Parties & Payment

Seller Name:			
Buyer Name:			
Sales Price:			
Commission :			
Referral Fee:			
Bonus:			
Other:			
Transaction Fee:	\$195.00		
Total:			

Disbursement

Agent 1 Name:		Amount:	
Agent 2 Name:		Amount:	
WJK Realty INC		Amount:	

X _____
W.J Kourkounakis

Date:

Please Mail Payments to:
W.J.K. Realty INC
3571 Far West Blvd #104
Austin Texas 78731