Jackson Association of REALTORS®

620 North State Street. Jackson, MS 3912 601-948-1332

Limited Function Referral Office (LFRO) Certification Form

To Designated REALTORS®: Please complete the following and return it to the Association no later than February 1, 2010.

In accordance with Article 10 Section 2 of the Bylaws of the Jackson Association of REALTORS®, this will certify that the undersigned Designated REALTOR® (or his firm) has a direct or indirect ownership interest in a Limited Function Referral Office engaged exclusively in soliciting and/or referring clients and customers to the REALTOR® for consideration on a substantially exclusive basis. This will also certify that all of the licensees affiliated with the Limited Function Referral Office (list provided below) are solely engaged in referring clients and customers and are not engaged in listing, selling, leasing, managing, counseling or appraising real property. I acknowledge that I may exclude the listed licensees from my REALTOR® dues and MLS fee formula so long as they meet the requirements of the Referral Company stated above.

Date _____

Certified by (Designated REALTOR®) _____

Signature of Designated REALTOR® _____

Name of Firm _____

Phone _____ Fax _____ Email _____

Agent's Name	License #