

CBB Transaction Verification Form

(To be completed and signed by Escrow Officer or Transaction Attorney)

			Trans	saction #:	of		
The following form must be (DocuSign is acceptable.)	e completed	in its entirety a	nd submitted	alongside the	CBB Transaction	Submittal Form	
Date:							
To Whom It May Concern:							
This letter serves to confirm the	hat		CPP Anni	icant Name			_
Of				icani Name			
		Brokerage	Firm				_
Acted as the Agent, Represent	ting: 🗌 Bu	ıyer 🗌 Seller 🔲	Both <u>OR</u>				
acted as the Managing Bro	oker oversee	eing Agent Name	:				_
BUSINESS SOLD NAME:							
BUYER NAME:							
CLOSING DATE:							
TOTAL SELLING PRICE:							
FEE PAID TO BROKERAGE:							_
To be filled out and signed b	oy Escrow Ag	gent or Transacti	on Attorney.				
Name of Signatory (Print):							
Company:							
Title:							
Address:							
Email:							
Phone number:							
I affirm that the information	n above is tr	ue in all respects					
Signature of Escrow Agent of	r Transactioı	n Attorney:					