

WORKSHEET

Date of Offer: OCTOBER 16,2010

IN2ITION Salesperson:

| Suite Number: 10th (265) | Floorplan: Lev | Level No.: Unit No. () |
|--|--|------------------------|
| PURCHASE PRICE & DEPOSITS: | The state of the s | |
| Purchase \$ 244,900 | 1 | |
| 1 st Deposit: \$2,000.00 with Agreement | | |
| 2 nd Deposit: Balance to 5% in 30 days \$\frac{1}{2} |) 145; O | Date: NOV 16 2010 |
| 3 rd Deposit: 5% in 90 days | 245,00 | |
| 4 th Deposit: 5% in 120 days |) (C) (C) | Date: FC b 16 2011 |
| 5 th Deposit: Total to 20% on occupancy \$\frac{1}{2} | d, 1945, 80 | Date: Apr 16 2012. |
| PLEASE MAKE CHEQUES PAYABLE TO HARRIS, SHEAFFER LLP in Trust | S, SHEAFFER LLP in Trust | CONDITIONS: |
| medicina | Cellonot | |
| PURCHASER #1 | PURCHASER #2 | |
| NATHAN HARTIS First, Middle & Last Name | First, Middle & Last Name | Ō |
| 03/35/1989 507959369 Date of Birth: (MVD/Y) S.I.N. | Date of Birth: (M/D/Y) | S.I.N |
| H0693 582 c870335 35 03 2014 Drivers License # Expiry Date | Drivers License # | Expiry Date |
| 4235 SHERWOODTWNF.BLUD 410 Address Suite# | Address | Suite# |
| HISSISSAUGA LAZIWS. | City | Postal Code |
| ALOSOS 6943. Residence Phone Business Phone | Residence Phone | Business Phone |
| Fax Number | Fax Number | |
| n martis 89 @ gmail com Email Address | Email Address | |
| PURCHASER'S SOLICITOR | | |
| Solicitor's Name | Firm | |
| Address | | Suite No. |
| City | Postal Code | |
| Phone Number | Email | |
| PURCHASER PROFILE: to be completed by agent/sign-up person | /sign-up person | |
| How did you hear about us? | Profession: | |
| How many dependents are living with you? | Dependents Ages: | Marital Status: |