



THE RESIDENCE
AT PARKSIDE VILLA

Family & Friends Worksheet

Date of Offer: June 26/08 Salesperson: Michelle
Suite Number: 712 Tower: 2 Floorplan: _____ Level No.: _____ Legal: _____

<u>Purchase Price & Deposits</u>	
Purchase Price:	\$ <u>279,900</u>
1 st Deposit:	\$2,000.00 with Agreement
2 nd Deposit:	\$2,000.00 in 30 days
3 rd Deposit:	\$2,000.00 in 120 days
4 th Deposit:	\$4,000.00 in 270 days
5 th Deposit:	Balance to 5% in 365 days
6 th Deposit:	5% on occupancy date

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PURCHASER #1

First, Middle & Last Name: Leonarda Carlucci
Date of Birth (M/D/Y): 01/27/1974 S.I.N.: 449109364
Drivers License #: CO629-4597-45127
Address: 3245 Epworth Cr. Suite #: _____
City: Dacula Postal Code: 1610B3
Residence Phone: (905) 827 5723 Business Phone: _____

PURCHASER #2

First, Middle & Last Name: Cezar Botelho
Date of Birth (M/D/Y): 11/06/1970 S.I.N.: 449 88135
Drivers License #: 3676011007-61106
Address: 3245 Epworth Cr. Suite #: _____
City: Dacula Postal Code: 1610B3
Residence Phone: 905 827 5723 Business Phone: _____

Fax Number: _____
Email Address: _____

Fax Number: _____
Email Address: _____

PURCHASER'S SOLICITOR

Solicitor's Name: _____ Firm: _____
Address: _____ Suite No.: _____
City: _____ Postal Code: _____
Phone Number: _____ Fax Number: _____ Email: _____

PLEASE MAKE CHEQUES PAYABLE TO HARRIS, SHEAFFER, LLP in Trust

PURCHASER PROFILE: to be completed by agent/sign-up person

Did you register through the Web? _____ End User or Investor? _____
How did you hear about us? _____ Profession: _____
How many dependents are living with you? _____ Dependents Ages: _____ Marital Status: _____