



# New Mexico Council of Exchangers

www.newmexicoexchangers.com

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PACKAGE TITLE:

HAVE OR NEED:

LOCATION ADDRESS

PRICE:

LOANS:

EQUITY:

FEE:

MLS #:

ENCUMBRANCES:  
(MORTGAGE BREAKDOWN)

BALANCE(S)

PAYMENT(S)

INT. RATE(S)

BALLOON(S) WHEN?

CAN    CANNOT BE MOVED

EQUITY:

CAN ADD:  
(WHAT, VALUE,  
EQUITY, LOCATION,  
ETC.)

INCOME:

EXPENSES:

WHY DOES NOT WANT:  
(SPECIFIC PROBLEM)

WANTS:  
(SPECIFIC BENEFITS)

WILL CONSIDER:

REMARKS:

CLIENT:

COUNSELOR:

ADDRESS:

CITY:

STATE:

ZIP:

OFFICE:

CELL:

Email:

License #:

I HEREBY CERTIFY THAT I HAVE A \_\_\_\_\_ MONTH  
EXCLUSIVE LISTING ON THE PROPERTY