



Disclosure Protection Plan

ESCROW CLOSING INSTRUCTION AND INVOICE

Today's date: _____

Sellers' name(s): _____

Property address: _____

Escrow No.: _____

Estimated Close of Escrow date: _____

To: _____

(Name of Escrow Company)

Money in the amount of \$ 299.00 with: _____

(Name of Escrow Company)

shall be used for payment of CRES' Disclosure Protection Plan and shall be payable to CRES Insurance.

Mail check to:

CRES Insurance, AJG

PO Box 95632, Chicago, IL 60694-5632

The \$299.00 shall be debited from the seller's net proceeds when escrow closes on the real property at the address listed above.

THE UNDERSIGNED HAVE READ AND FULLY UNDERSTAND THE FOREGOING ESCROW, ITS CLOSING INSTRUCTIONS AND THE INSTRUCTIONS SET FORTH ABOVE

Seller Name (please print)

Seller Signature

Seller Name (please print)

Seller Signature

Date

Date