SELLER'S RELEASE FORM

Date: _____

TO WHOM IT MAY CONCERN:

RESORT: _____

ACCOUNT #: _____

UNIT/WEEK:

YOU ARE HEREBY REQUESTED TO RELEASE VERIFICATION INFORMATION TO MY TRANSACTION COORDINATION COMPANY, <u>QUALITY TIMESHARE CLOSINGS</u>, FOR THEIR USE IN PROCESSING MY TRANSACTION, AS I AM SELLING THE ABOVE REFERENCED OWNERSHIP.

ALSO, IF YOU RETAIN THE RIGHT OF FIRST REFUSAL, I HEREBY REQUEST THAT YOU WAIVE THIS RIGHT IN ORDER FOR MY TRANSACTION TO BE COMPLETED AS IS. PLEASE FAX YOUR WAIVER TO *THE REQUESTOR* AS SOON AS POSSIBLE.

SELLER 1 SIGNATURE

SELLER 2 SIGNATURE

PRINTED NAME

PRINTED NAME

FILE #: