Form #A-6			
	Board or State Association		
Address	City	State	Zip
_	se to Grievance Committee Request	for Informatio	n
To the Grievance Committee of	the:		
	Board or State Association		
	Filed		, 20
Complainan	ut(s)	Respondent(s)	
Manual of the Board. Respondent(s) replies and substar This is true and correct to the bes	ness dispute as defined in Article 17 of the Code of I ntiates such reply by the following attached statement that knowledge and belief of the undersigned. I (we) deed in this reply are true and correct.	nt:	
	Respondent(s):		
Name (Type/Print)	Signature of REALTOR® Principal		Date
Address			Telephone
Name (Type/Print)	Signature of REALTOR® Principal		Date
Address		1	Telephone
Name (Type/Print)	Signature of REALTOR® Principal		Date
Address			Telephone