



STATEMENT OF LIABILITIES REQUEST

Requested by _____

Postal address _____

Email _____ Phone _____

Vendor

Name _____ WMI account _____

Property

Lot/s _____ DP/s _____

Shares/Entitlements included in sale

Number of Shares	Number of Water Entitlements	Number of Delivery Entitlements
_____	_____	_____

Purchaser

Name _____

Phone/Email _____

Proposed settlement date _____

Office use

Receipt number _____ Date _____

Statement issued _____