

Verification of Employment / Supervision

The applicant's Principal Broker or Broker in Charge must sign and date this form.

Applicant's Last Name	First Name	MI	Former/Maiden
Rollins	Leslie	Jean	

Real Estate Office Name		
Pall Spersa Company		
Mailing Address - Street		
P/O Bx 539		
City	State	Zip Code
Stowe	VT	05672
Telephone	Fax	
802 - 253 - 9771		
Principal Broker or Broker in Charge who will provide supervision.		License #
Name		
Pall Spersa		081.0000380
Main or Branch Office where supervision will occur.		License #
Name Pall Spersa Company		083.0001160-main

Statement of Principal Broker or Broker in Charge

The applicant named above is or will be associated with this agency as of the following date.	(month/day/year)
	8/24/18
Signature of Principal Broker or Broker in Charge <u>Pall Spersa</u>	Date <u>8/24/18</u>