BROOKFIELD PLACE

Tenant Name:	Website:
Mailing Address:	
Main Telephone #:	Fax #:
# Employees:	Type of Business:
Business Hours :	
TENANT REPRESENTATIVE (All Correspondence and Bulletins)	
	Title:
	Email:
SENIOR CONTACT (i.e. President, C.E.O., Managing Partner)	
Name:	Title:
Mailing Address (if different)	
Telephone #:	Email:
	A COCUMITING CONTACT (loves in a s)
	ACCOUNTING CONTACT (Invoices)
Name:	Title:
Mailing Address (if different)	
Telephone #:	Email:
ACCOUNTING	OONTACT (David Latter and Many End Adirector and A
ACCOUNTING	CONTACT (Rent Letter and Year End Adjustments)
Name:	Title:
Mailing Address (if different)	
Telephone #:	Email:
Completed by:	Date: