

LANDSHARK USER SUBSCRIPTION

PLEASE FILL OUT FOR EACH USER

FIRST NAME _____

LAST NAME _____

COMPANY NAME _____

ADDRESS _____

CITY _____

STATE _____

ZIP _____

PHONE # _____

FAX # _____

E-MAIL _____

Please return this Subscription with the Agreement to:

Benton County Recorder
P O Box 129
Foley, MN 56329