DEADLINE MUST BE RECEIVED AT THE BOARD OFFICE BEFORE 5:00 P.M. DECEMBER 1, 2017. FAX TRANSMISSIONS WILL NOT BE ACCEPTED

Dayton Area Board of REALTORS® ROOKIE OF THE YEAR AWARD 2019 Official Application

For transactions between October 1, 2018 through September 30, 2019

All inform	nation MUST be properly completed re	egardless of method used and WILL BE disqualif	fied if incomplete, improperly filled out or	illegible, or cont	ains false informa	tion.	
NAME (as	it appears on license)		MEMBER NUMBER DAYTIME PHONE				
NAME (as	you would like it on award only)						
HOME PHONE:		E-MAIL ADDRESS:	MEMBERSHIP JOIN D	ATE:	E:LICENSE ISSUE DATE:		
INIT	TAL LICENSE ISSU	UE DATE MUST BE BET	WEEN OCTOBER 1,	2017 AN	D SEPTE	MBER 30, 2018	
Please p	place in chronological order:						
DATE CLOSED	ADDRESS OF PROPERTY	NAME OF LISTING AGENT AND CO- OP FIRM	NAME OF SELLING/LEASING AGENT AND CO-OP FIRM	SALE/LEASE PRICE	\$ AMOUNT CLAIMED	TRANS. CREDITS .25/.5/.75/1	
			Page Total				
			Accumulated Total				
	•	oto to: DABR, P. O. Box 111, Dayton, OH 4540 tober 1, 2016 thru September 30, 2017.	1 or 1515 S. Main St. Dayton, OH 45409.				
We hereby	y certify that the above facts are correc	et and that the above named salesperson has close	ed the "Dollar Amount Claimed" or "Trans	action Credits" a	s indicated.		
	FIRM		APPLICANT				
FIRM ADDRESS			APPLICANT(Signature) BROKER/OFFICE MANAGER(Signature)				

APPLICANT AND BROKER/OFFICE MANAGER SIGNATURES REQUIRED.

NAME: MEMBER NUMBER:									
Please place in chronological order. Photocopy reproductions of this application will be accepted.									
DATE CLOSED	ADDRESS OF PROPERTY	NAME OF LISTING AGENT AND CO- OP FIRM	NAME OF SELLING/LEASING AGENT AND CO-OP FIRM	SALE/LEASE PRICE	\$ AMOUNT CLAIMED	TRANS. CREDIT			
			Accumulated Total		00				
CERTIFIC We hereby FIRM	CATION OF SALES/LEASING: Octobe certify that the above facts are correct and	er 1, 2016 through September 30, 2017. that the above named salesperson has closed "\$ Amour	nt Claimed" or "Transaction Credits" as indicated APPLICANT	d.					
I. HKIM			AFFLICANI	(Si	gnature)				
FIRM AL	DDRESS		BROKER/OFFICE MANAGER						

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