

VALLEY BOARD OF REALTORS

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REALTOR® Of The Year Nomination Form

Please nominate a REALTOR® who has helped you along your real estate career.

NOMINEE NAME					
FIRST NAME		LAST NAME			
		1			
RESIDENCE ADDRESS		СІТУ	STATE	ZIP CODE	
CONTACT PHONE NUMBER	EMAIL AD	DRESS			
AK REAL ESTATE LICENSE NUMBER & EXPIRATION DATE WEBSITE ADDRESS					
YEAR FIRST ENTERED REAL ESTATE	BROKER	ř.			
				-	
WHEN MAKING A NOMINATION PLEASE COI	NSIDER THE FOLL	OWING FACTORS:			
REALTOR® SPIRIT, CIVIC ACTIVITY, BUSINESS	ACCOMPLISHME	ENT, STATE ASSOCIATION	N ACTIVITY, NATIONAL ASS	OCIATION	ACTIVITY
Signature of Submitter			Date		
Signature of Submitter					