

DABR Office Use Only

Date _____

Paid _____

Entered _____

NAME (as it appears on license) _____ MEMBER NUMBER _____

HOME PHONE: _____ E-MAIL ADDRESS: _____ Were you a DABR award winner in any year 1999-2016? ☐ Yes ☐ No

Award of Achievement

\$1 Million

☐ Method A Dollar Volume

25 Transaction Credits

☐ Method B Transaction Credits

Award of Distinction

\$2.5 Million

☐ Method A Dollar Volume

50 Transaction Credits

☐ Method B Transaction Credits

Award of Excellence

\$5 Million

☐ Method A Dollar Volume

75 Transaction Credits

☐ Method B Transaction Credits

Pinnacle of Performance

\$7.5 Million

☐ Method A Dollar Volume

100 Transaction Credits

Method B Transaction Credits

Please 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
			Page Total			
			Accumulated Total			

CERTIFICATION OF SALES/LEASING: October 1, 2016 thru September 30, 2017.

FIRM _____ APPLICANT _____

FIRM ADDRESS _____ BROKER/OFFICE MANAGER _____

(Signature)

APPLICANT AND BROKER/OFFICE MANAGER SIGNATURES REQUIRED.

[illegible]

We hereby certify that the above facts are correct and that the above named salesperson has closed "\$ Amount Claimed" or "Transaction Credits" as indicated.

FIRM ADDRESS _____ BROKER/OFFICE MANAGER _____
(Signature)

[illegible]

We hereby certify that the above facts are correct and that the above named salesperson has closed "\$ Amount Claimed" or "Transaction Credits" as indicated.

FIRM _____ APPLICANT _____
(Signature)

FIRM ADDRESS _____ BROKER/OFFICE MANAGER _____
(Signature)

[illegible]

We hereby certify that the above facts are correct and that the above named salesperson has closed "\$ Amount Claimed" or "Transaction Credits" as indicated.

FIRM _____ APPLICANT _____
(Signature)

FIRM ADDRESS _____ BROKER/OFFICE MANAGER _____
(Signature)

[illegible]

We hereby certify that the above facts are correct and that the above named salesperson has closed "\$ Amount Claimed" or "Transaction Credits" as indicated.

FIRM _____ APPLICANT _____
(Signature)

FIRM ADDRESS _____ BROKER/OFFICE MANAGER _____
(Signature)