

Cooperative Spirit Nomination Form

Name of Nominee
Brokerage or Company Affiliation
Year of Affiliation with GAKA
Achievements and Contributions:
a) Activity in Local Board –
b) Description of Activity that exemplifies nominees Cooperative Spirit
(Attach additional sheets if necessary)

Signed by Nominator	Date
Signed by Norminator	Date
Address	
- 1 1	
Telephone	
Poturn completed application to:	CAVA
Return completed application to:	GAKA
	500 N. 12 th Street
	Suite 100
	Lemoyne, PA 17043
	Or
	Email to Courtney Box at exec@gakrealtors.com by
	10/31/19.

Incomplete nominations will **NOT** be considered

All nominees names are held in the strictest confidence by the committee.