

2019 President's Sales Club Official Application Application Fee: FREE

Name: _						
_icense/	File #					
Compan	y Name: _					
Please	check wh	nich category				
□\$1 Mi	illion	□\$2.5 Million	□\$5 Million	□\$7.5 Million		
Achiev	ement	Distinction	Excellence	Pinnacle		
OFFICIAL	Rules					
R se	ent to TRAR ally 26, 2019 a. In pe b. Emai c. Sent If you	a completed 2019 Ohio RE. 3, 590 Longbow Drive, Maum 4 at the TRAR office. Please s 4 rson 1 led (megan@toledorealtors.c 4 overnight delivery service or 1 are submitting your applicat	ee, OH 43537. All applications are the below delivery option through the U.S. Post Officion by mail, the envelope materials. It is the sole response.	re. nust be postmarked by the <i>US</i> nsibility of the applicant to ensure		
-		to the Ohio REALTORS® in to OR, 200 East Town S		ogram, you must send your 15		
 The official rules for the 2019 Ohio REALTORS® President's Sales Club Application apply to the Toleo Regional Association of REALTORS® 2019 President's Sales Club with the exception of the "Top Five "Rookie" Categories. Reporting period for 2019 Toledo Regional Association of REALTORS® President's Sales Club is July 2018 to June 30, 2019. 						
TRAR Pre		les Club Application but you		sident's Sales Club Application to the io REALTORS® President's Sales		
CERTIFICA	ATION:					
•	information		• •	that I have read the Rules and ub Application) and agree to honor		
Applicant	s Signature:					
Jate.						



Ohio REALTORS_® President's Sales Club Award - Individual

2019 Official Coversheet or Period of July 1, 2018 through June 30, 2019

OAR OFFICE USE ONLY	
Check #	
Entered by:	

THE PSC DEFINITION OF A TEAM HA	S CHANGED, YOU MAY BE	CONSIDERED A TEAM. P	LEASE SEE NEW RULE	IN OUR RULES AND REGULATIONS
NAME: (as to appear on certificate or plaque)			Designation:	One NAR approved designation. ex. ABR,
FILE NUMBER:	6 or 10 digit number ex. 111222 or 2001012345	BOARD OF REALTORS®:		CRS, GRI
HOME ADDRESS:		CITY:	ST:	ZIP:
HOME PHONE:	BUSINESS PHONE:		EMAIL:	
AWARD BEING APPLIED FOR:				
INDIVIDUAL AWARD				
AWARD OF ACHIEVEMENT Method A (\$ Vol.) - \$1 Million Method B (Trans. Credit) - 25 Credits Total \$ Vol. or Credit		0 Credits Method B (Tra	ol.) - \$5 Million ns. Credit) - 75 Credits	NNACLE OF PERFORMANCE Method A (\$ Vol.) - \$7.5 Million Method B (Trans. Credit) - 100 Credits Total \$ Vol. or Credit
Are you a "Rookie Recipient"? first two years of licensure. Special recognises				
Mandatory Application Fee: \$65.00 (includes Electronic Certificate)	Yes, I would like a pl	aque (Additional \$20)	Check #
Credit Card #:		Exp Date:	Signature:	
Your email address for confirmation and	to email your electronic certific	ate		
- DEADLINE: Postmarked by July 22, 2019				
- COMPUTER GENERATED FORMS: Are ac IT WILL NOT BE PROCESSED.	cepted as long as they are in the e	exact same format as the offici	al application. THIS COVE	RSHEET MUST BE ATTACHED OR
- TRANSACTIONS FROM A PREVIOUS FILE Managers must be attained and indicated on the		al Estate firm that you were em	ployed with in the past yea	r, the signatures of both Broker/Office
- MAIL TO: Ohio REALTORS®, 200 East Town	Street, Columbus, OH 43215. Pk	ease refer to the official Rules	& Eligibility for more detaile	d information.
By signing this form you are verifying that all contains false information.	information is properly completed	regardless of method used and	d WILL BE disqualified if inc	omplete, improperly filled out, illegible or
ADDITIONAL SIGNATURE				

2019 Ohio REALTORS President's Sales Club Application

Please list all transactions from July 1, 2018 to June 30, 2019 in chronological order DEADLINE: All applications must be POSTMARKED by July 22, 2019

NAME:				FILE NUMBER:			_ ?	- ?	
DATE CLOSED	?	ADDRESS OF PROPERTY	NAME OF LISTINGAGENT AND CO-OP FIRM	NAME OF SELLING/LEASING AGENT ANDCO-OP FIRM	SALE/LEASE PRICE	\$ AMOUNT CLAIMED	TRANS. CREDITS	REFER- RAL (x)	
We hereby	certify	that the above facts are correct and	d that the above named salesperson has	closed	LATED TOTAL	\$0.00	0.00		
"\$ Amount	Claime	ed" or "T ransaction Credits" as indi	cated. I understand that if false informati	on is submitted on this form, there is po	tential for the dis	qualification of t	he entire office	•	
Previous I	Firm:(ii	f applicable)		Current Firm:					
Broker/Of	fice Ma	anager:	(Signature)	Firm Address		City	State	Zip	
Applicant	Signa	ture:	(S.gridiano)	Broker/Office Manager:		•	Otate	210	
		•				(Signature)			

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			ACCUMU	LATED TOTAL	\$0.00	0.00	
We hereby certi	ify that the above facts are correct ar	nd that the above named salesperson had that the above named salesperson had cated. I understand that if false informations	as closed				
		cated. I dilderstand that it laise informat	·	otential for the dis	qualification of		
Previous Firm:	(if applicable)		Current Firm:				
Broker/Office N	<mark>/lanager:</mark>	(Signature)	Firm Address		City	State	Zip
Applicant Sign	ature:	(əngirature)	Broker/Office Manager:		City	Sidle	∠IP
Applicant Signature.			(Signature)				

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			ACCUMU	LATED TOTAL	\$0.00	0.00	
"\$ Amount Claim	y that the above facts are correct an ned" or "Transaction Credits" as indic	d that the above named salesperson hacated. I understand that if false informat	as closed on is submitted on this form, there is po	otential for the dis	qualification of	the entire office	
Previous Firm:	if applicable)		Current Firm:				
	♦ //						
Broker/Office M		(Signature)	Firm Address		City	State	Zip
Applicant Signature:			Broker/Office Manager: (Signature)				