

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 _____

Address _____

Telephone _____

Email _____

Return completed application to: Email to Courtney Box at exec@gakrealtors.com by 12/20/24.

Or

GAKA
Courtney Box
500 N. 12th Street
Suite 100
Lemoyne, PA 17043

Incomplete nominations will NOT be considered

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