

**2011 TRAINOR FAIRBROOK
HUMANITARIAN AWARD NOMINATION FORM**

DEADLINE FOR NOMINATION FORM: TUESDAY, JANUARY 31, 2012

***THIS NOMINATION FORM MUST BE TYPED AND COMPLETED IN STRICT COMPLIANCE WITH
THE RULES AND REGULATIONS GOVERNING THE NOMINATION AND SELECTION OF THE WINNER OF
THE 2011 TRAINOR FAIRBROOK HUMANITARIAN AWARD***

I. CANDIDATE'S INFORMATION

Candidate's Name: _____ **Title:** _____

Firm Name: _____ **Address:** _____

Description of area(s) in the field of commercial real estate within which the Candidate devotes at least 75% of his or her professional time:

II. CHARITABLE ACTIVITIES AND CONTRIBUTIONS

A. Name of Charitable Organization or Activity: _____

Address: _____

Name and Telephone Number of Contact Person (who may be contacted to verify the information given regarding Candidate's Activities, Duties, Accomplishments and Financial Contributions with this Organization or Activity): _____

Detailed Description of Charitable Purpose/Goal of Organization or Activity: _____

Board, Committee or Other Leadership Positions Held by Candidate with this Organization or Activity and Dates Held:

Detailed Description (Including the Dates When the Following Occurred) of Candidate's Activities, Duties, Accomplishments and Individual Financial Contributions with this Organization or Activity: _____

B. Name of Charitable Organization or Activity: _____

Address: _____

Name and Telephone Number of Contact Person (who may be contacted to verify the information given regarding Candidate's Activities, Duties, Accomplishments and Financial Contributions with this Organization or Activity): _____

Detailed Description of Charitable Purpose/Goal of Organization or Activity: _____

Board, Committee or Other Leadership Positions Held by Candidate with this Organization or Activity and Dates Held:

Detailed Description (Including the Dates When the Following Occurred) of Candidate's Activities, Duties, Accomplishments and Individual Financial Contributions with this Organization or Activity: _____

C. Name of Charitable Organization or Activity: _____
Address: _____
Name and Telephone Number of Contact Person (who may be contacted to verify the information given regarding Candidate's Activities, Duties, Accomplishments and Financial Contributions with this Organization or Activity): _____

Detailed Description of Charitable Purpose/Goal of Organization or Activity: _____

Board, Committee or Other Leadership Positions Held by Candidate with this Organization or Activity and Dates Held: _____

Detailed Description (Including the Dates When the Following Occurred) of Candidate's Activities, Duties, Accomplishments and Individual Financial Contributions with this Organization or Activity: _____

D. Name of Charitable Organization or Activity: _____
Address: _____
Name and Telephone Number of Contact Person (who may be contacted to verify the information given regarding Candidate's Activities, Duties, Accomplishments and Financial Contributions with this Organization or Activity): _____

Detailed Description of Charitable Purpose/Goal of Organization or Activity: _____

Board, Committee or Other Leadership Positions Held by Candidate with this Organization or Activity and Dates Held: _____

Detailed Description (Including the Dates When the Following Occurred) of Candidate's Activities, Duties, Accomplishments and Individual Financial Contributions with this Organization or Activity: _____

PLEASE USE ADDITIONAL PAGES IF NECESSARY.

III. CANDIDATE'S SELECTION OF RECIPIENT CHARITY OR CHARITIES TO RECEIVE THE \$5,000.00 CONTRIBUTION FROM TRAINOR FAIRBROOK

Name of Charity: _____
Telephone: _____

Contact: _____
Amount of Contribution: _____

Name of Charity: _____
Telephone: _____

Contact: _____
Amount of Contribution: _____

Name of Charity: _____
Telephone: _____

Contact: _____
Amount of Contribution: _____

Name of Charity: _____
Telephone: _____

Contact: _____
Amount of Contribution: _____

Nomination Made By: _____ Title: _____

Address: _____

Telephone: _____ Date: _____

Candidate's Certification (Required):

I have reviewed the foregoing nomination form and certify that it is true and accurate to the best of my knowledge.

Name: _____

Date: _____

THIS NOMINATION FORM MUST BE ACCOMPANIED BY A PROFESSIONAL-QUALITY DIGITAL PHOTO OF THE CANDIDATE (200 DPI OR BETTER) ON COMPUTER DISK OR CD SAVED AS A JPEG OR TIF DOCUMENT. YOU MUST DELIVER COMPLETED FORM, SUPPORTING DOCUMENTS AND PHOTO ON CD BY 3:00PM TUESDAY, JANUARY 31, 2012 TO :

***BOYA HUMANITARIAN AWARD NOMINATIONS
ATTN: BRENDA APPLGATE
TRAINOR FAIRBROOK
980 FULTON AVENUE
SACRAMENTO, CALIFORNIA 95825***

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