



Harford County Association of REALTORS®

Shining Beacon Award

Description of the Project: _____

Brokerage Firm: _____

Office Address: _____

Office Broker Manager: _____

Office Phone: _____

Office Community Project Name: _____

Date Held: _____

Location Held: _____

Total # of Agents with Brokerage: _____

of Agents that Participated: _____

Total Volunteer Man Hours: _____

Total Dollars Raised: \$ _____

Total # of Citizens helped: _____

Form submitted by: _____

Send completed form and ONE PHOTO to:

info@harfordrealtors.com

Information may be used for our monthly press release and for the Maryland C.A.R.E. Award and Shining Beacon Award

