



NOMINATIONS FOR AHMA-NCNH 2009 Awards Program

Name of Nominee _____	Title _____
Award Category: <input type="checkbox"/> Affordable Housing Professional	<input type="checkbox"/> Affordable Housing Maintenance Professional
<input type="checkbox"/> Government Employee	<input type="checkbox"/> Resident
Property Category: <input type="checkbox"/> Family	<input type="checkbox"/> Senior
<input type="checkbox"/> Disabled/Handicapped	<input type="checkbox"/> Other (describe) _____
Property Name or Government Agency _____	
Address/City/Zip _____	
Name of Management Agent (if applicable) _____	
Mgmt Agent Address/City/Zip _____	
Contact Person _____	Phone _____
Fax _____	E-Mail _____

Nominated by _____	Company/Property _____
Phone _____	Fax _____
E-mail _____	

What qualities does the nominee have that reflect the goals of this award? Attach additional pages if necessary.

Please describe the nominee's significant contributions and why you are nominating her/him for this award. Attach additional pages if necessary.

Submit this nomination by fax to (510) 834-2462 no later than Friday, July 31, 2009.