



## REALTOR® INTRA-OFFICE TRANSFER

When a Responsible REALTOR® transfers a REALTOR® from one office to another office within the same firm, this form must be submitted to the Association within 7 days of said transfer.

(Please print or type)	Membership No		
Name of Licensee Transferred: _			
Real Estate License Number:		Exp	
	(Identification Number)		
Member E-mail Address:			
Date of Transfer:			
The above licensee has been tra	nsferred:		
From:			
	(Old Address)	(City)	(Zip Code)
To:	(New Address)	(City)	(Zip Code)
Professional Designations:	,	,	,
BOARD COMMITTEES:			
Date: Respons	ible REALTOR®'s signature: _		
	Firm Name:		
	Firm Number:		

FAX BACK TO: 818-786-0364