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Form 8	

## **GSMLS, LLC Agent Transfer to New Broker**

This is to notify Garden State MLS, Supr Broker as follows:	ra Products, Inc. and	National Cooperative Bank that I have transferred to another	
Agent ID (6 numbers, starts with a 2)			
Agent's Name (please print)		New Office Name	
Home Address		New Office ID (4 or 6 numbers)	
Home City, State Zip	1	New Office Street Address	
NJ Real Estate License # (7 Numbers)		New Office City, State Zip	
Home Phone (include area code)	'	New Office Phone	
Agent's Signature		New Broker/Manager's Signature	
Board of REALTORS: I am a member	r of the following Boar	rd of REALTORS (NOT YOUR MLS)	
Eastern Bergen GUCAR  Meadowlands Middlesex	Hudson	Mercer HSAR Passaic Sussex	
Meadowlands Middlesex Warren RealSource			
•		ke place. Incomplete or missing information will cause this form to to (973) 984-1790 or mailed to GSMLS, 1719 Route 10 East, Suite	
	Below is For O	ffice Use Only	
ate Received at GSMLS Date Completed		GSMLS Membership Signature	
Date Received at KIM	Date Completed KIM Membership Signature		
Date Received at Board	Date Completed Board Membership Signature		