



NABOR
Northwest Arkansas Board of REALTORS®

COMMITTEE REPORT/ACTION ITEM

Committee: _____ Chair: _____

Date of report/request: _____ Date of last report: _____

Report:

Action Item Request:

Does this request have a financial impact on the association? YES NO

If yes, please attach an explanation to this form.

Approved Tabled Referred back to committee

Northwest Arkansas Board of REALTORS®

Date