

PROCLAMATION REQUEST FORM Office of the Mayor, City of Greenville, City Hall, 200 West Fifth Street, Greenville, NC 27835 Fax: 252-329-4435

Please complete your request form, and submit via e-mail, fax, mail or hand delivery NOTE: Requests will go through an internal review process, so it is necessary to submit your request at least two weeks prior to the date the document is needed to insure timely issuance.					
DATE OF REQUEST:		DATE WHEN PROCLAMATION IS NEEDED:			
FULL NAME OF PERSON REQUESTING PROCLAMATION:					
ADDRESS:					
CITY:			E:	ZIP CODE:	
TELEPHONE NUMBER:			EMAIL:		
BRIEF SUMMARY AND/OR BACKGROUND OF THE EVENT OR ORGANIZATION:					
NAME AND DATES OF THE DAY, WEEK, OR MONTH TO BE PROCLAIMED:					
PROPOSED TEXT FOR THE PROCLAMATION:					
ACTION TO BE TAKEN WHEN THE PROCLAMATION IS READY FOR PICKUP:	CALL		E-MAIL	☐ MAIL PROCL	AMATION TO:
NOTE: Once signed by the Mayor, the original proclamation is returned to the requestor, a copy is sent to the Public Information Office to be broadcast on the Government Access Channel, and a copy is sent to <u>The Daily Reflector</u> newspaper. The issuance of a proclamation does not constitute an endorsement by the City of Greenville.					