

COMMENDATION 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.

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DATE OF REQUEST:		DATE WHEN COMMENDATION IS NEEDED:		
FULL NAME OF PERSON	I REQUESTING COM	MENDATION:		
ADDRESS:				
CITY:		STATE:		ZIP CODE:
TELEPHONE NUMBER:			E-MAIL:	
BIOGRAPHICAL INFORMATION FOR THE INDIVIDUAL:				
SIGNIFICANT CONTRIBUTIONS OF THE INDIVIDUAL:				
DATE AND TYPE OF EVENT BEING PLANNED FOR THE INDIVIDUAL:				
ACTION TO BE TAKEN WHEN THE COMMENDATION IS READY FOR PICKUP:	□ CALL	□ E-M	MAIL	☐ MAIL COMMENDATION TO: