

MAYOR DEBE HOLLINGSWORTH

200 East 8th Avenue Suite 201 Pine Bluff, Arkansas 71601 870-543-1855

PROCLAMATION REQUEST FORM

Proclamation requested by _____

Street address _____

City _____ State _____ Zip _____ Phone _____

A request for a proclamation has been received to honor: _____

Please complete the following information **and return it as soon as possible.**

Mail to: Office of Mayor Debe Hollingsworth **or**
200 East 8th Avenue Suite 201
Pine Bluff, Arkansas 71601

Fax to: Mayor Debe Hollingsworth
870-543-1801

Complete the following and attach additional sheets as necessary:

Name of each recipient or honoree: _____

Why honoree is being recognized: _____

Other organizations honoree may have participated in: _____

Any specific information, contributions, anecdotes, etc. that you wish to have considered for inclusion in the proclamation: _____

Date the proclamation is to be presented: _____

Location where the proclamation is to be presented: _____

Name of contact person representing the presenting organization: _____

Street address _____

City _____ State _____ Zip _____ Phone _____

Date of occasion or event: _____

Please indicate if you would like Mayor Hollingsworth to present the proclamation(s) and staff will notify you if she is available. Yes, _____ we'd like Mayor Hollingsworth No, _____ the Mayor does not need to be present.
