



PROCLAMATION REQUEST

Today's Date: _____

Person or Event to be Recognized: _____

Reason for Recognition: _____

Date of Recognition (if applicable): _____

Date Needed By: _____

Disposition of Document:

Mailed _____

Picked Up _____

Presented at Council Meeting _____

Contact Information:

Name of Person Requesting Proclamation: _____

Contact Phone Number: _____

Email Address: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Return form to the City Clerk, mcorrell@aberdeenmd.gov. If you have any questions, call the City Clerk at 410-297-4211. Please note: the Mayor and Council reserve the right to approve and deny any request for ceremonial documents.