

PROCLAMATION REQUEST FORM

First and Last Name:	
Today's Date:	
Name of Organization/Contact information/Email address/Phone number:	
Are you requesting this Proclamation be read by the Mara City Commission meeting?	yor at
Yes No No	
What meeting date are you requesting your Proclamation be read by the Mayor? (The City Commission meets the and fourth Mondays at 7pm) click here for meeting scheme	2nd
Who will be in attendance to receive the Proclamation? Include First and Last name).	/Please
Will the Proclamation be read at an event and not at a Ci Commission meeting? If yes, please include the date, ti location of event.	•
Are you requesting the Mayor be present to read this Proclamation at your event?	
Yes No	
This forms should be associated to the City Cloub plant with your dust Ducdonstion	

(This form should be provided to the City Clerk along with your draft Proclamation Traci.Houchin@sanfordfl.gov). Please allow 30 days for processing.