

2009 OCMA President's Award Nomination

Nominee Name _____

Nominee's Job Title _____

Contact information:

Company Name _____

Business Address _____

City _____ State _____ Zip _____

Telephone # _____

Email Address _____

Reasons for consideration for the President's Award (use additional pages, if necessary):

Nominator Name _____

Nominator's Job Title _____

Nominator Information:

Company Name _____

Business Address _____

City _____ State _____ Zip _____

Telephone # _____

Email Address _____

Date Submitted: _____

Send completed form to: William Stille

The Columbus Dispatch

5300 Crosswinds Dr.

Columbus Ohio 43228

bstille@dispatch.com