

CITY OF BEEVILLE

OFFICE OF THE CITY SECRETARY

400 N. WASHINGTON STREET BEEVILLE, TEXAS 78102 361-358-4641

REQUEST FOR PROCLAMATION OR RECOGNITION

Requestor First Name:	Requestor Last Name:		
Requestor Phone Number:		<u> </u>	
Requestor Email:			
Organization:			
Full Street Address:			
Type of Recognition : Proclamation \square	Recognition	Letter from	the Mayor \square
Recognition Category :			
Citizen Achievement \square	Special Events/Days □		
Non-Profit Achievement □	Community Achievement □		
Non-Profit Service Group \square	National/International Event (In-City Sponsor Req'd) \square		
Occasion of Importance/Significance	Business Anniversary (50 years or greater) □		
Increase Public Awareness □			
Name of Proclamation:			
Date of Proclamation:	Date Proclamation is N	leeded:	
Purpose of Proclamation:			
Please describe the purpose the proclamation is to serve, information to make 4 points. You may add additional particles and the proclamation is to serve, information to make 4 points.	ages if needed.	•	rovide enough
Reissue Request from Previous Year(s)?			
Will you be submitting the proclamation to an	y publication(s)?	Yes □	No □
Please note: Certificates or other forms of recognition may to not be the appropriate form of recognition. prior to the date needed.			
	City Secretary Staff:		

^{*}Incomplete requests will not be processed.