



2010 OPASTCO CHAIRMAN'S AWARD

Nominator: _____

Company: _____

City/State/Zip: _____

Date: ____/____/____ Telephone: _____

I submit the following nomination for the 2010 Chairman's Award:

Nominee and Title: _____

Company: _____

City/State/Zip: _____

Telephone: _____

Briefly summarize this individual's accomplishments that demonstrate commitment to the well being and advancement of the independent telephone industry. Please include your personal experiences with this individual, which are vital in the Chairman's Award decision making process. (Attach additional sheet if needed):

Signature: _____ Date: ____/____/____

To be considered, this form must be returned to OPASTCO by November 13, 2009.

Return completed form to:

OPASTCO Chairman's Award Nominations

Attn: Martha Silver

21 Dupont Circle, NW, Suite 700

Washington, D.C. 20036

FAX: 202/659-4619

E-mail: mks@opastco.org