

**2010 OPASTCO LIFETIME ACHIEVEMENT AWARD
OFFICIAL NOMINATION FORM**

Nominator: _____

Company: _____

City/State/Zip: _____

Date: ____/____/____

Telephone: _____

I submit the following nomination for the 2010 Lifetime Achievement 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 Lifetime Achievement Award decision making process. (Attach additional sheet if needed):

Signature: _____ Date: ____/____/____

To be considered, this form must be in the OPASTCO office by June 11th

Return completed form to:

OPASTCO Lifetime Achievement Award Nominations
C/O Martha Silver (mks@opastco.org)
2020 K Street NW, 7th Floor
Washington, D.C. 20006
Fax: 202-659-4619