

11th Annual Black History Month Metro Council Program

2013 Ninth District Nomination Form

Nominee Name: _____

Address: _____ **Zip:** _____

Phone: _____ **Email:** _____

Why should this person be nominated to be an honoree? _____

Nomination Submitted By: _____

Contact information: _____

Please complete the form and submit by Monday, January 28, 2013

Councilwoman Tina Ward-Pugh
601 W Jefferson Street, Louisville, KY 40202
(502) 574-7844 fax
kyle.ethridge@louisvilleky.gov **email**