

Mayors Hall of Fame

2020 Nomination Form

Nomination Deadline August 10, 2020

Mayor's Name: _____

Municipality: _____

Address: _____

Phone Number: () _____

Dates in Office as Mayor: _____

(Must have served at least 10 years)

Name of Individual
Completing Form: _____

Date Form Completed: _____

Phone Number: () _____

Fax Number: () _____

Confirmations will be mailed to the inductee in October. **Please keep a copy for your records.**



**Please mail this form to the
N.J. State League of Municipalities
222 West State Street
Trenton, New Jersey 08608
Or e-mail to dbijou@njlm.org**