PROCLAMATIONS / CERTIFICATE REQUEST FORM

CONTACT PERSON INFORMATION

*Name of Contact Person Nettie L. Norphleet

*Street Address 817 Criterion Street

*City Prichard *State Alabama *Zip Code 36610

*Phone# (251) 454-5530 *Additional Phone# (251) 457-6479

*Email Address momosnana@gmail.com

PROCLAMATION / CERTIFICATE INFORMATION

*Name of Individual, Group or Organization Alabama State Society of American Medical Technologists

*Name or Title of Event National Medical Assistants Recognition Week (NMARW)

*Date of Event October 15 – 19, 2018 *Pickup Request Date As soon as available

Please refer to the Proclamation / Certificate Policy regarding criteria, content guidelines and submittal instructions.

*Information to be listed on Proclamation / Certificate

Please refer to attached specifications in the "Sample Proclamation"

*Additional Comments

Mobile Contacts: Daniel Benson, RPT, RMA

9620 Autumn Leaf Drive

Mobile, Alabama 36695

(251) 214-3993

SAMPLE PROCLAMATION

WHEREAS, the health of all Americans depends upon educated minds and trained hands; and

WHEREAS, the practice of modern medicine at the exacting standards we now enjoy would be impossible without the clinical and administrative duties performed daily in the physician's office, clinic, laboratory or hospital and

WHEREAS, these multi-skilled professionals help create a professional and comforting atmosphere for patients by offering them guidance and support, and

WHEREAS, through this dedication the medical assistants of the United States have made a vital contribution to the quality of health care.

NOW THEREFORE, I, (name), Mayor of the (City, State) of (name), do hereby proclaim the week of October 15-19, 2018 as:

NATIONAL MEDICAL ASSISTANTS RECOGNITION WEEK

and urge all citizens to recognize and support the vital service provided by medical assistants for the benefit of all citizens.

IN WITNESS WHEREOF, I have hereunto set my hand and caused the seal of the city of Mobile, to be affixed this (day) of (month), 2018.

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(Name of Mayor)