



*2022 James J. Skelly Award
Nomination Form*

NOMINEE

NAME: _____ TITLE: _____

APC MEMBER COMPANY: _____

COMPANY ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: _____

EMAIL: _____

Purpose of nomination: _____

SUBMITTED BY

NAME: _____ TITLE: _____

COMPANY: _____

DATE: _____

RETURN COMPLETED FORM TO:

Lisa M. Sagan

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Harrisburg, PA 17102

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