

City of Canton, Ohio • Office of the Mayor  
**William J. Healy II**

**Letter of Support/Proclamation Request Form**

*Please submit the following form in person or via fax at 330-489-3282 no less than three weeks before the established due date listed below. If you have questions, please call 330-438-4300.*

1. Purpose of Letter/Proclamation \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Individual, Agency, or Organization Requesting Letter/Proclamation  
\_\_\_\_\_

3. Contact Person:

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Daytime Phone (\_\_\_\_\_) \_\_\_\_\_

E-mail \_\_\_\_\_

4. Due date \_\_\_\_/\_\_\_\_/\_\_\_\_

5. Please use the space below or attach additional information regarding the purpose/recipient.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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**FOR OFFICE USE ONLY**    Date Requested \_\_\_\_\_    Rec'd By \_\_\_\_\_  
Date Reviewed \_\_\_\_\_    Reviewed By \_\_\_\_\_  
Date Notified \_\_\_\_\_    Check one: \_\_\_\_\_ Pick-up \_\_\_\_\_ Mail \_\_\_\_\_ Mayor

Rec'd By (Applicant sign) \_\_\_\_\_    Date: \_\_\_\_\_    Office Initial: \_\_\_\_\_