



NOMINATION FORM

FOR THE

“MARK” AWARD

Please complete this form and return to the address listed at the bottom prior to October 1, 2016.

NAME _____

ADDRESS _____

CITY, STATE & ZIP _____

TELEPHONE OFFICE _____

CELL _____

BUSINESS NAME:

OWNER _____ **OR EMPLOYEE** _____

MEMBERSHIP DATE OF JOINING TEXAS CHAPTER NATP _____

PERSON NOMINATING THIS INDIVIDUAL _____

TELEPHONE WHERE YOU CAN BE REACHED _____

ATTACH LETTERS OF RECOMMENDATIONS BEHIND THIS FORM.

HAVE NOMINEE COMPLETE THE QUESTION ON NEXT PAGE AND INCLUDE WITH APPLICATION.



PAGE 2 – NOMINATION FORM

Mail all nominations to: TEXAS CHAPTER NATP

% CONNIE STATON

P. O. BOX 10215

MIDLAND, TEXAS 79702

432-686-7638

**HAVE NOMINEE COMPLETE A PARAGRAPH DETAILING HOW HE/SHE
GOT INTO THE TAX PROFESSION:**