**LRA Literacy Award**

Council Name

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Council President's Name/Address/Phone Number

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Name/Address of Nominee (s):

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

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Nominee’s Telephone Numbers Home  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Briefly state reasons for the selection of the nominee (s) and include a short biography.  You may attach an additional sheet and supporting documentation.

Please return this completed form and documentation postmarked by **May 1** to state LRA Literacy and Community Projects Chair:

Sharon Gilmore

3111 McDuff Drive

Winnsboro, LA 71295

[sharonjgilmore@aol.com](mailto:sharonjgilmore@aol.com)

(318) 531-9723

Revised July 2016