



2016 Manufacturer of the Year and Distributor/Supplier/Logistics Business of the Year Award

NOMINATION FORM

(Please use one form for each nomination you make.)

Company Name: _____

Contact Name: _____

Contact Email: _____ Contact Phone Number: _____

Facility Address: _____

Person/Organization Making the Nomination: _____

The company knows I/we have nominated them for this award.

The company does not know I/we have nominated them for this award.

Do you know if this company is a member of MAF or a regional manufacturing association? _____

If a regional manufacturing association, which one? _____

Email your completed form to Jeff Littlejohn, WSource, jml@wsourcegroup.com

THANK YOU FOR YOUR NOMINATION!