**ALCC Customer Service Award Nomination Form**

**Nominator's Information**

Name

Address

City State Zip

Email Address Phone

**Nominee's Information - Company you are nominating**

Company Name

Address

City State Zip

Email Address Phone   

May ALCC contact you by phone or email if we have any questions about your nomination?

**Procedures**   
In 50 words or less please describe why you are nominating this company for the Customer Service Award. Nominations must be submitted at [www.alcc.com/customers](http://www.alcc.com/customers) or via email to [social@alcc.com](mailto:social@alcc.com).

Nominations must be received by 5pm on December 7, 2018.

**Signature of Release**    
I verify that all information contained in this form is accurate. I release entry material to ALCC for media use and other purposes ALCC deems appropriate.

Signature of Nominator                                                                                                  Date

*By typing your name above you agree to everything stated in the signature release.*