

---

# CLARION COUNTY ASSOCIATION OF TOWNSHIP OFFICIALS

www.ClarionCountyATO.org

*Supporting government serving people*

---

## President

Bergen C. Dilley  
1117 Staab Road, Lot 64  
Strattanville, PA 16258  
814-764-5657  
E-mail: CCATO@windstream.net



## Secretary-Treasurer

Stephen C. Allison  
630 Schoolhouse Road  
Fairmount City, PA 16224  
814-275-4466  
E-mail: CCATO@windstream.net

June 20, 2017

TO: All Officials  
FROM: Bergen Dilley, President  
RE: **27<sup>th</sup> Annual Awards (deadline for entry is September 8, 2017)**

### Purpose of the Awards Program

To Honor a Township Official or Employee and a Township who has achieved or helped to achieve outstanding accomplishments that have benefited their Township or County.

#### ELIGIBLE ENTRANTS

##### 1. INDIVIDUAL AWARD

- a. A Township Official or Employee who held an office or was employed during the past year.
- b. An individual may be nominated for recent or lifetime achievements.
- c. Has shown that they have significantly accomplished a program(s) or a project(s) that has benefited their Township or County.

Eligible Individual Entrants may be nominated by an elected or appointed official of the same Township or by one of the County Association Officers.

##### 2. TOWNSHIP AWARD

- a. A township which has demonstrated the purpose of Township government to protect and improve the quality of life and safety of its residents. Examples: Local Government cost-cutting, coordination of local volunteer efforts, the advancement of Township goals with respect to State or Federal regulations, establishment of new services or programs, or the success of local development projects.

Eligible Township Entrants may be nominated by an elected or appointed official of any Township or by one of the County Association Officers.

A Nomination Form for each award has been included in your invitation to the County Convention. Please give your consideration to these Awards. After selecting your nominees, please return them in a **Separate Envelope** if you are making your reservation for the Convention. Please mark "**NOMINEE**" on the outside of the envelope, as this will be given to the Awards' Selection Committee.

CLARION COUNTY ASSOCIATION OF TOWNSHIP OFFICIALS  
27<sup>th</sup> ANNUAL **OUTSTANDING TOWNSHIP AWARD**

NOMINATION FORM  
**Deadline: September 8, 2017**

NAME OF TOWNSHIP NOMINEE \_\_\_\_\_

CHAIRMAN'S NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ PA, ZIP \_\_\_\_\_

TELEPHONE NUMBER (\_\_\_\_\_) \_\_\_\_\_

THIS TOWNSHIP IS BEING NOMINATED BECAUSE:

(A Township that has demonstrated the purpose of Township government to protect and improve the quality of life and safety of its residents. Example: Local Government cost-cutting, coordination of local volunteer efforts, the advancement of Township goals with respect to State or Federal regulations, establishment of new services or programs, or the success of local development projects.)

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

(Use back of form if more space is required)

NAME AND ADDRESS OF PERSON MAKING NOMINATION:

NAME: \_\_\_\_\_

TOWNSHIP \_\_\_\_\_ OFFICE: \_\_\_\_\_

(supervisor, secretary, tax collector, auditor)

ADDRESS: \_\_\_\_\_

TELEPHONE NUMBER (\_\_\_\_\_) \_\_\_\_\_

DATE SUBMITTED \_\_\_\_\_ SIGNED: \_\_\_\_\_

Return to: Stephen C. Allison, 630 Schoolhouse Road, Fairmount City, PA 16224

Write **NOMINEE** on envelope

CLARION COUNTY ASSOCIATION OF TOWNSHIP OFFICIALS  
27<sup>th</sup> ANNUAL **OUTSTANDING INDIVIDUAL AWARD**

NOMINATION FORM  
**Deadline: September 8, 2017**

NAME OF NOMINEE \_\_\_\_\_

POSITION \_\_\_\_\_

TOWNSHIP \_\_\_\_\_

COUNTY \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ PA, ZIP \_\_\_\_\_

I HAVE NOMINATED THE ABOVE PERSON BECAUSE:

(Summary of Accomplishments: summarize the accomplishments for which nominee is being nominated addressing the following criteria: outstanding accomplishments through programs or projects that benefited their Township and whose service to the Township exhibits the high standard of dedication, creativity and leadership)

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

(Use back of form if more space is necessary)

NAME AND ADDRESS OF PERSON MAKING NOMINATION:

NAME: \_\_\_\_\_

TOWNSHIP \_\_\_\_\_ OFFICE: \_\_\_\_\_

(supervisor, secretary, tax collector, auditor)

ADDRESS \_\_\_\_\_

TELEPHONE NUMBER (\_\_\_\_\_) \_\_\_\_\_

DATE SUBMITTED \_\_\_\_\_ SIGNED \_\_\_\_\_

Return To: Stephen C. Allison, 630 Schoolhouse Road, Fairmount City, PA 16224

Write **NOMINEE** on envelope