

REQUEST FOR PROCLAMATION/CERTIFICATE

Type of Document Requested: \_\_\_\_\_

Reason for Request: \_\_\_\_\_

Addressed or Presented to: \_\_\_\_\_

Text of document to read as follows: (We will edit and format appropriately) or email to address shown below.

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

Contact Person (Name and Phone Number): \_\_\_\_\_

Date Needed by: \_\_\_\_\_

Please return to:  
Errica Garrett, Administrative Assistant to City Council  
City of Newport Beach  
[counciladminteam@newportbeachca.gov](mailto:counciladminteam@newportbeachca.gov)  
(949) 644-3004