



*The City of Fitchburg*

*Massachusetts*  
OFFICE OF THE MAYOR

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Citation / Proclamation Request Form

**Contact Information:**

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_

**Event Details:**

Title of Event: \_\_\_\_\_

Location: \_\_\_\_\_

Date: \_\_\_\_\_

Time: \_\_\_\_\_

**Citation Details:**

Recipient (Name or Business): \_\_\_\_\_

Type of Event (Retirement, Birthday, Scouting, ect.): \_\_\_\_\_

Event Details: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please save as a document and email to [atourigny@fitchburgma.gov](mailto:atourigny@fitchburgma.gov) and [j david@fitchburgma.gov](mailto:j david@fitchburgma.gov) or mail to:

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