



**State of Georgia
Governor Nathan Deal
Official Lieutenant Colonel Certificate Request Form**

Date Submitted: _____

Person of Contact: _____ **Position/Title** _____

Phone (Work) _____ **(Cell)** _____

Mailing Address _____

City _____ **State** _____ **Zip** _____

Email _____

Recipient's Full Name: _____

Mailing Address For Certificate _____

City _____ **State** _____ **Zip** _____

Reason for this recommendation:

Please submit this request by email, mail or fax:

Email: proclamations@georgia.gov

Mailing Address

Office of the Governor Nathan Deal

Attn: John Vaughan

206 Washington St SW

Atlanta, GA 30334

Fax: 404-657-7332