



2015 Concrete Champion Award Nomination

*Nominations will be accepted from CPAM members only and
must be received by CPAM no later than November 1, 2015*

Name of Nominee: _____

Company: _____ Title: _____

Address/Phone: _____

List outstanding contributions the nominee has made to Minnesota's concrete paving industry:

Other activities: _____

Your personal comments on why this individual should receive the Concrete Champion award:

CPAM member endorsement: *(One nomination per member company.)*

Company Name: _____

Representative: _____

Signature/Date: _____