



INDIANA ASSOCIATION OF BUILDING OFFICIALS

The Earl E. Bowman Memorial Award for Meritorious Service

Nominee Information

Full Name: _____
Last *First* *M.I.*

Address: _____
Street Address *Apartment/Unit #*

_____ *City* *State* *ZIP Code*

Telephone: () _____ Date (due 90 days before ABM): _____

Email address: _____

Please explain how this nominee fulfills the following requirements. This award shall be awarded to a current member in good standing who best will have demonstrated dedication and personal achievement, and have brought honor to their career, to their community and to the Indiana Association of Building Officials.

Name of person nominating this person: _____ **Telephone #:** _____

Forward this completed form to: IABO, 17437 Carey Road #265, Westfield, IN 46074 or to iabo.com