

**Bill & Barbara Walsh Distinguished Service Award  
Nomination Form**

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

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

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

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

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

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

List (2) two individuals who are familiar with the nominee's history with JWP

1. \_\_\_\_\_

2. \_\_\_\_\_

What is the nominee's major contribution or service to the Trust?

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Additional background information:

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Please mail the completed form to  
**1974 Sproul Road**  
**Suite 400,**  
**Broomall, PA 19008**