

WOMEN *of* DISTINCTION

2025

You are Invited
*to nominate a woman you
know who is contributing to
our quality of life.*

New York State Assembly
Albany, NY 12248

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ASSEMBLYWOMAN *Mary Beth*
WALSH

Join Assemblywoman Mary Beth Walsh

**in recognizing the contributions
of the outstanding women
in our community. Inside,
nominate a woman you know
by **Monday, March 17, 2025,**
for this special recognition!**



Assemblywoman Walsh with 2024 WOD Honorees

WOMEN *of* DISTINCTION

2025



ASSEMBLYWOMAN *Mary Beth*
WALSH

*Assemblywoman
Mary Beth Walsh's*
**Women of Distinction
Award Ceremony**

WOMEN *of* DISTINCTION

2025

Please return this form to:
Assemblywoman Mary Beth Walsh
199 Milton Avenue, Suite 2
Ballston Spa, NY 12020

**Nominations must be
submitted on or before
Monday, March 17, 2025!**

**For more information or to
contact Assemblywoman
Mary Beth Walsh about any
legislative issue, call her
district office at
1-518-884-8010 or email
walshm@nyassembly.gov.**



Assemblywoman Walsh with 2023 WOD Honorees



ASSEMBLYWOMAN *Mary Beth*
WALSH

***** NOMINEE MUST BE A RESIDENT OF THE 112TH ASSEMBLY DISTRICT *****

Name of Nominee: _____

Address of Nominee: _____

ZIP Code: _____ Telephone: _____

Email of Nominee: _____

I wish to nominate the above-named woman for Assemblywoman Mary Beth Walsh's WOMEN OF DISTINCTION award in the following category (please circle the appropriate category):

- | | |
|------------------|-------------------------|
| Business | Community/Civic Affairs |
| Education | Health Care |
| Humanitarian | Government |
| Military Affairs | Volunteer |
| Other _____ | |

In the space below, please type or print a description of the nominee and her contribution. Feel free to attach additional sheets if necessary.

Your Name: _____

Your Address: _____

ZIP Code: _____

Telephone: _____

Your Email: _____