EXHIBIT "A"

PROPERTY OWNER FORM

Name of Property:	
Location of Property:(Street/City/County)	
I,complete list of owners of record for the pr	, hereby certify that the following constitutes the
Owner Information	
Name:	
Mailing Address:	
Phone Number:	
Email Address:	
(Signature of Nomination Preparer)	
Typed Name and Title:	
Date:	

Note: If nomination affects multiple property owners, please contact the SHPO's NRHP Coordinator at 405-522-4479 for details on how to document all property owners.