



# WOMEN of DISTINCTION

2026

## You are Invited

to nominate a woman you know who is  
contributing to our quality of life.

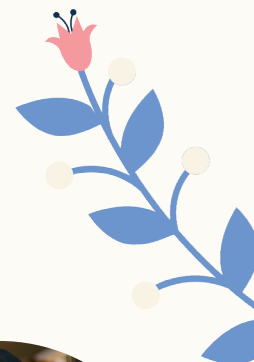


New York State Assembly  
Albany, NY 12248

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## Join Assemblywoman Jodi Giglio

in recognizing the contributions of the  
outstanding women in our community.  
Inside, nominate a woman you know by  
**Friday, February 27th** for this  
special recognition!



# WOMEN of DISTINCTION

2026



Assemblywoman  
Jodi Giglio's  
**WOMEN OF  
DISTINCTION  
AWARD  
CEREMONY**

Please return this form to:  
Assemblywoman Jodi Giglio  
30 West Main Street, Suite 103  
Riverhead, NY 11901

Nominations must be  
submitted on or before  
**Friday, February 27th**

For questions about the form  
or any other government  
related issue, please contact  
Assemblywoman Jodi Giglio's  
District Office at:

30 West Main Street, Suite 103  
Riverhead, NY 11901

(631) 727-0204

[giglioj2@nyassembly.gov](mailto:giglioj2@nyassembly.gov)



# WOMEN of DISTINCTION

2026

**\*\*\* NOMINEE MUST BE A RESIDENT OF THE 2ND ASSEMBLY DISTRICT \*\*\***

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

Address of Nominee: \_\_\_\_\_  
\_\_\_\_\_

ZIP Code: \_\_\_\_\_ Telephone: \_\_\_\_\_

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

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

Business

Education

Humanitarian

Military Affairs

Other

Community/Civic Affairs

Health Care

Government

Volunteer

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

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

Address: \_\_\_\_\_  
\_\_\_\_\_

ZIP Code: \_\_\_\_\_ Telephone: \_\_\_\_\_

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

