



National FCE Credential Form

_____ (Year) National FCE Annual Conference

State: _____

Date: _____

Attention: National FCE Credentials Committee

This letter is to certify that the voting delegate or alternate is:

Name _____

Address-Complete _____

Telephone: Home _____ Cell _____

Email address _____

State President

Alternate Delegate

State Secretary Signature: _____

Print name: _____

Please email the completed form to the National FCE Secretary. The form can be brought to the National FCE Annual Conference and given to the National FCE Secretary before the Annual Business Meeting.