

20 _____ HEART OF FCE for (state) ______

Due Date: Postmarked by April 15

Each State may submit **ONE** nominee. **Send one copy to:** National FCE Headquarters, 73 Cavalier Blvd Ste 106, Florence KY 41042

Nomination Name:		
Mailing Address:		
City/State/Zip:		
Phone:	_Email:	
Club:		County:

Please attach recent head and shoulders photograph (2"X2") of nominee (original photo requested.)

Briefly describe the reason for recommending this person for the HEART OF FCE Award. Please include individual effort, any project(s) and results, or other contributions made by nominee while working in FCE. Mention the ways they have given their time, talents, and energy sharing skills learned in FCE to make a difference not only in FCE, but in other areas as well. Be specific. For publicity purposes, LIMIT THE SUMMARY TO 100 WORDS OR LESS.

Name o	f person submitting	:		
Mannig	Audress			
City/Sta	te/Zip:			
Phone:		Email:		
State Pr	esident's signature:			