

**FOUNDERS DAY REPORT FORM
For Local and State Chairmen**

FI 3-2

Gay Dill

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Check one: Local Club State

State _____ State Chairman _____

City (local club) _____

Name of Club _____

Number of Dues-paying Members (includes, club, state, NFMC dues) _____

Club is 100% if contributed \$1.00 per-member to state treasurer *before March 1* .

Has \$1.00 per-member contribution been paid to state treasurer *before March 1*? Yes No

Club President's Name (Print or type) _____

Club President's Address _____

City/State/Zip Code _____

Local Founders Day Chairman:

Send this form to your state Founders Day chairman by *March 15*.

State Founders Day Chairman:

Send this form to the NFMC Founders Day Chairman listed above by *April 1*.