



FEDERATION OF NEW YORK INSURANCE PROFESSIONALS, INC.

Application For

RESOLUTION

To be Presented by the

Federation of New York Insurance Professionals, Inc.

Name of Recipient: _____

Served on Federation Board: yes no

Reason for Resolution:

Local Charter Member _____

Memorial to Death of Member _____

To commemorate an anniversary of _____ years.

Other: _____

Local Association: _____

President's Signature: _____

Date: _____

Contact email: _____

Please note all resolutions are subject to review by the Board and approved at their Board meetings. You can submit resolutions at any time throughout the year, up to the application deadline. The deadline for the 2024 convention is **April 1, 2024. NO resolutions will be accepted after the due date and especially at CONVENTION!**

If you have any questions, please contact me:

e-mail: joanne@fulmontmutual.com

Joanne Gifford

PO Box 487

Johnstown NY 12095

Work Phone: 518 762 3171 x 110

Receipt of application will be acknowledged within 10 business days.

Local Associations Include:

*Albany ~ Buffalo ~ Chenango Valley ~ Crossroads ~ Fulton County ~ Mohawk Valley ~ North Country
Orange County ~ Queens County ~ Syracuse ~ Westchester County ~ Long Island*