



**COVER PAGE**

**FLORIDA ASSOCIATION OF HEALTHY START COALITIONS, INC.**

**ITN for Healthy Start's 30<sup>th</sup> Birthday Celebration**

PR Firm Contact Name: \_\_\_\_\_

PR firm Business Name (if different): \_\_\_\_\_

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

City, State, Zip: \_\_\_\_\_

Telephone Number(s): (Including area code) \_\_\_\_\_

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

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

Federal Employer Identification Number (FEIN): \_\_\_\_\_

Authorized Signature X \_\_\_\_\_

Printed Name of Authorized Signature: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_