## **Farm Bureau Community Council Roster**

Yea	ar

Please complete this form as soon as your officers are elected. Print firmly or type information below (no carbon paper is necessary).

County	Council Name Date Council was organized			
Regular Meeting Date			Current Date	
Please check the appropriate	box to indicate who should receive your cou	incil packet. If no name is checked, the	e packet will automatically be sent t	o your Discussion Leader
	Address, City, Zip+4	E-mail		
Li Chairperson (organizes t	he meeting times and locations)			
☐ Discussion Leader (has a	an email address and is willing to be the p	point of contact for their council)		
☐ Secretary (fills out roster,	summary and activity sheets and forwar	ds them to the county Farm Bureau	office)	
Name of Council Family	Address, City, Zip+4	Area Code/Phone No.	Email	FB Membership

**Not currently receiving Buckeye Farm News (BFN)?** All active members (farmer status) receive the BFN automatically. Associate members (non-farmer) can also receive it by calling 614.249.8229 or by emailing **www.info@ofbf.org**. Non-members can receive the BFN by joining Ohio Farm Bureau. Join by contacting your county Farm Bureau office or by visiting **www.GrowWithFB.org**.