One Warsaw Deeper Interest

Personal Name _____ Home Adress_____ Home Township State/City/Zip Home Phone_____ Home Email____ DOB_____ Place of Birth _____ Describe demographic background or identifiers you feel are important for us to know: Family_____ Area of Expertise ____Administration ____Finance ____Fund Raising ____Investment Business Legal Marketing Facilities Maintenance _____Planning _____Audit _____Education ____Non-Profit Governance Organization Experience _____Business _____Government _____Nonprofit Relevant Personal Skills: **BUSINESS** Place of Business (If retired, last position held) **Business Address** Business Township_____ City/State/Zip_____ Business Phone______ Business Email_____ Position/Title

Type of Business_____