**ATTACHMENT D**

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| **CURRENT BOARD OF DIRECTORS** | | | |
| Agency Name: |  | Funding Strategy: | First 5 Center (Program Implementation) |

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| 1. | List the number of Board members required by your agency’s bylaws: | | | | |  | |  | | |
| 2. | Number of members on current Board: |  | | |  | | | | | |
| 3. | When and how often does the Board meet: | | |  | | | | |  | |
| 4. | Provide us with a current Board member listing below in the following format: | | | | | | | | | |
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| Name of Member | | | Board Position | | | | City of Residence | | | Occupation/Affiliation |
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###### If you attach a separate board listing please make sure it contains the above requested information. Duplicate this form as necessary.