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(DATE)

The Maryland State Family Child Care Association expresses sincere appreciation to

\_\_\_\_\_ for serving in the position outlined below:

(NAME)

***Committee Member:*** *Elected or appointed to perform some services in an organization as a committee member. - 1 PAU*

This position required many hours of volunteering and is deserved of the amount of PAU's stated by the Maryland Credentialing Program.

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(MSFCCA President)