

MINNESOTA ASSOCIATION

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Name of the Applicant: Address: Telephone Number: Email Address: Person Nominated: Address: Telephone Number: Email Address: Telephone Number: Email Address:
Telephone Number: Email Address: Person Nominated: Address: Telephone Number: Email Address: Please describe to us the person you are nominating and their exemplary actions that distinguish them as a per-
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son of the year with the Minnesota Holstein Association:
Explain how the nominee shares their passion and encourages others to become involved:
f this person is awarded this honor, would you be willing to share your kind words with them in person at the All-

Breeds Convention in Onalaska, Wisconsin on March 2, 2019?