



#WeCare
We Care
The Wyoming Community Cares

WE CARE NOMINATION INFORMATION:

Nominee Name _____
Address _____
City State Zip _____
Phone _____
Email _____

Please include your name and contact information:

Nominator _____
Phone _____
Email _____

Please provide an explanation of why this nominee demonstrates the We Care philosophy.

Please send support materials or and the completed nomination form to Megan Josefowicz, communications specialist, at josefowiczm@wyomingmi.gov or mail to:

City of Wyoming
c/o: Megan Josefowicz
Communications Specialist
PO Box 905
Wyoming, MI 49509

For additional information, contact Megan Josefowicz at josefowiczm@wyomingmi.gov or call her at 616.530.7209.