

2009-2010 DISTRICT OFFICER INFORMATION --

District # _____

Please return ASAP, records will not be updated at Department Headquarters until current form is received.

Please print & provide all information requested District's Federal I. D. # _____

President Name _____ Unit # _____
Address _____ City _____ Zip _____
Phone (____) _____ Work Phone (____) _____
Fax (____) _____ Email _____

1st Vice President Name _____ Unit # _____
Address _____ City _____ Zip _____
Phone (____) _____ Email _____

Secretary Name _____ Unit # _____
Address _____ City _____ Zip _____
Phone: (____) _____ Email _____

Treasurer Name _____ Unit # _____
Address _____ City _____ Zip _____
Phone: (____) _____ Email _____

Legislative Name _____ Unit # _____
Address _____ City _____ Zip _____
Phone: (____) _____ Email _____

Chaplain Name _____ Unit # _____
Address _____ City _____ Zip _____
Phone: (____) _____ Email _____

Juniors Name _____ Unit # _____
Address _____ City _____ Zip _____
Phone: (____) _____ Email _____

VA&R Name _____ Unit # _____
Address _____ City _____ Zip _____
Phone: (____) _____ Email _____

C&Y Name _____ Unit # _____
Address _____ City _____ Zip _____
Phone: (____) _____ Email _____

Americanism Name _____ Unit # _____
Address _____ City _____ Zip _____
Phone: (____) _____ Email _____

Membership Name _____ Unit # _____
Address _____ City _____ Zip _____
Phone: (____) _____ Email _____