

2017-2018 COUNTY OFFICERS

County Location _____ District # _____

Does your County meet? Yes No How often does your County meet? _____

Please return ASAP –
Information will not be updated at Department Headquarters
until current form is received.
PLEASE PRINT and provide all information that is requested

President

Name _____ Unit # _____

Address _____ City _____ Zip _____

Phone _____ Work Phone _____

Fax _____ Email: _____

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 _____