

Due to Department Headquarters by April 30th
Due to the District President by April 30th



COUNTY OFFICER LIST

DISTRICT _____ COUNTY _____

THE UNITS IN YOUR COUNTY PAY \$ _____ PER CAPITA FOR COUNTY DUES.

COUNTY PRESIDENT

Unit Town & Number _____

Name _____ Phone _____

Address _____ City _____ State _____ Zip _____

E-mail address _____ Membership Number _____

COUNTY VICE PRESIDENT

Unit Town & Number _____

Name _____ Phone _____

Address _____ City _____ State _____ Zip _____

E-mail address _____ Membership Number _____

COUNTY SECRETARY

Unit Town & Number _____

Name _____ Phone _____

Address _____ City _____ State _____ Zip _____

E-mail address _____ Membership Number _____

COUNTY TREASURER

Unit Town & Number _____

Name _____ Phone _____

Address _____ City _____ State _____ Zip _____

E-mail address _____ Membership Number _____