

# POST OFFICERS

YEAR \_\_\_\_\_

## INSTRUCTIONS

BE SURE TO PRINT WITH PEN (BLUE OR BLACK)

PLEASE FILL OUT EVEN IF OFFICERS ARE THE SAME AS LAST YEAR

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IF BOX NUMBER, ALSO LIST STREET ADDRESS

POST NO. \_\_\_\_\_ CITY \_\_\_\_\_ COUNTY \_\_\_\_\_ DISTRICT \_\_\_\_\_

POST ADDRESS \_\_\_\_\_ TOWN \_\_\_\_\_ ZIP \_\_\_\_\_

POST TELEPHONE NO. (\_\_\_\_) \_\_\_\_\_

COMMANDER \_\_\_\_\_ TELEPHONE NO. (\_\_\_\_) \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_

ADJUTANT \_\_\_\_\_ TELEPHONE NO. (\_\_\_\_) \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_

FINANCE OFFICER \_\_\_\_\_ TELEPHONE NO. (\_\_\_\_) \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_

SERVICE OFFICER \_\_\_\_\_ TELEPHONE NO. (\_\_\_\_) \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_

MEMBERSHIP CHAIRMAN \_\_\_\_\_ TELEPHONE NO. (\_\_\_\_) \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_

LIST DAY OR DAYS REGULAR MEETINGS ARE HELD EACH MONTH.

\_\_\_\_\_ TIME \_\_\_\_\_

\_\_\_\_\_ TIME \_\_\_\_\_

AMOUNT OF POST OR COUNTY DUES \$ \_\_\_\_\_

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THANK YOU FOR RETURNING YOUR POST OFFICERS LIST ON TIME  
SERVING YOU BETTER IS OUR MAIN OBJECTIVE