

## SAMPLE CHAPTER OFFICERS' LIST



**Chapter Name:** \_\_\_\_\_

**Chapter #** \_\_\_\_\_

**Term of Office:** \_\_\_\_\_

**PRESIDENT**

Street Address \_\_\_\_\_

City, State/Prov.; Zip/Postal Code \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

**SECRETARY**

Street Address \_\_\_\_\_

City, State/Prov.; Zip/Postal Code \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

**PRESIDENT ELECT**

Street Address \_\_\_\_\_

City, State/Prov.; Zip/Postal Code \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

**MEMBERSHIP CHAIR**

Street Address \_\_\_\_\_

City, State/Prov.; Zip/Postal Code \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

**VICE PRESIDENT**

Street Address \_\_\_\_\_

City, State/Prov.; Zip/Postal Code \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

**NEWSLETTER EDITOR**

Street Address \_\_\_\_\_

City, State/Prov.; Zip/Postal Code \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

**TREASURER**

Street Address \_\_\_\_\_

City, State/Prov.; Zip/Postal Code \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

**FACULTY ADVISOR**

Street Address \_\_\_\_\_

City, State/Prov.; Zip/Postal Code \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

**Complete and submit this form to your CEC state/provincial unit. Be sure to report your new officers each year.**