Harpeth River District United Methodist Women
Local Unit Officers **YEAR** _____

DISTRICT _____ **LOCAL UNIT** _____

President **Class of** _____

Name _____
Last First Middle

Address _____
Street City Zip

Home # _____ Work # _____ Fax # _____ E-mail _____
(Area Code)

Vice President **Class of** _____

Name _____
Last First Middle

Address _____
Street City Zip

Home # _____ Work # _____ Fax # _____ E-mail _____
(Area Code)

Secretary **Class of** _____

Name _____
Last First Middle

Address _____
Street City Zip

Home # _____ Work # _____ Fax # _____ E-mail _____
(Area Code)

Treasurer **Class of** _____

Name _____
Last First Middle

Address _____
Street City Zip

Home # _____ Work # _____ Fax # _____ E-mail _____
(Area Code)

Education and Interpretation Coordinator **Class of** _____

Name _____
Last First Middle

Address _____
Street City Zip

Home # _____ Work # _____ Fax # _____ E-mail _____
(Area Code)

Membership Nurture and Outreach Coordinator **Class of** _____

Name _____
Last First Middle

Address _____
Street City Zip

Home # _____ Work # _____ Fax # _____ E-mail _____
(Area Code)

Social Action Coordinator **Class of** _____

Name _____
Last First Middle

Address _____
Street City Zip

Home # _____ Work # _____ Fax # _____ E-mail _____
(Area Code)

Spiritual Growth Coordinator **Class of** _____

Name _____
Last First Middle

Address _____
Street City Zip

Home # _____ Work # _____ Fax # _____ E-mail _____
(Area Code)

Secretary of Program Resources **Class of** _____

Name _____
Last First Middle

Address _____
Street City Zip

Home # _____ Work # _____ Fax # _____ E-mail _____
(Area Code)

Communications Coordinator **Class of** _____

Name _____
Last First Middle

Address _____
Street City Zip

Home # _____ Work # _____ Fax # _____ E-mail _____
(Area Code)

Chairperson, Committee on Nominations **Class of**

Name _____
Last First Middle

Address _____
Street City Zip

Home # _____ Work # _____ Fax # _____ E-mail _____
(Area Code)

Committee on Nominations **Class of** _____

Name _____
Last First Middle

Address _____
Street City Zip

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(Area Code)

Committee on Nominations **Class of** _____

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(Area Code)

Committee on Nominations **Class of** _____

Name _____
Last First Middle

Address _____
Street City Zip

Home # _____ Work # _____ Fax # _____ E-mail _____
(Area Code)

Sub-Group or Circle: _____

Name _____
Last First Middle

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Sub-Group or Circle: _____

Name _____
Last First Middle

Address _____
Street City Zip

Home # _____ Work # _____ Fax # _____ E-mail _____
(Area Code)

RETURN BY <u>NOVEMBER 1</u> TO THE DISTRICT SECRETARY

Marilyn Smith
1000 Five Points Road
Pulaski, TN 38478
mckayfirestone@energize.net