

## 2017-2018 COUNTY OFFICER REPORT 2017-2018

**Please Print or Type this Report**

DATE \_\_\_\_\_

NAME OF COUNTY \_\_\_\_\_

MEETINGS HELD AT \_\_\_\_\_ ON \_\_\_\_\_

DATE OF ELECTION \_\_\_\_\_ CMDR.  
SIGNATURE \_\_\_\_\_

**COMMANDER** \_\_\_\_\_ POST # \_\_\_\_\_ ID# \_\_\_\_\_

ADDRESS \_\_\_\_\_ HOME # ( ) \_\_\_\_\_  
CITY, ZIP \_\_\_\_\_

E-MAIL \_\_\_\_\_ CELL # ( ) \_\_\_\_\_

**ADJUTANT** \_\_\_\_\_ POST # \_\_\_\_\_ ID# \_\_\_\_\_

ADDRESS \_\_\_\_\_ HOME # ( ) \_\_\_\_\_  
CITY, ZIP \_\_\_\_\_

E-MAIL \_\_\_\_\_ CELL # ( ) \_\_\_\_\_

**SERVICE OFFICER** \_\_\_\_\_ POST # \_\_\_\_\_ ID# \_\_\_\_\_

ADDRESS \_\_\_\_\_ HOME # ( ) \_\_\_\_\_  
CITY, ZIP \_\_\_\_\_

E-MAIL \_\_\_\_\_ CELL # ( ) \_\_\_\_\_

**FINANCE OFFICER** \_\_\_\_\_ POST # \_\_\_\_\_ ID# \_\_\_\_\_

ADDRESS \_\_\_\_\_ HOME # ( ) \_\_\_\_\_  
CITY, ZIP \_\_\_\_\_

E-MAIL \_\_\_\_\_ CELL # ( ) \_\_\_\_\_

**MEMBERSHIP CHM'N.** \_\_\_\_\_ POST# \_\_\_\_\_ ID# \_\_\_\_\_

ADDRESS \_\_\_\_\_ HOME # ( ) \_\_\_\_\_  
CITY, ZIP \_\_\_\_\_

E-MAIL \_\_\_\_\_ CELL # ( ) \_\_\_\_\_

**VICE CMDR.** \_\_\_\_\_ POST # \_\_\_\_\_ ID# \_\_\_\_\_

**VICE CMDR.** \_\_\_\_\_ POST # \_\_\_\_\_ ID# \_\_\_\_\_

**This form must be returned to Department Headquarters prior to Department Convention.  
Forward one copy to Department and keep one copy for your files.**