

LODGE COMMITTEE CHAIRPERSONS

[Required per Sections 3.090 and 13.020]



ER-ELECT & SECRETARY, PLEASE COMPLETE IMMEDIATELY! Type or print clearly, making certain that spelling is correct, attach SEPARATE LIST of Lodge Officers-Elect and -Appointive for upcoming Lodge year and return to your District Deputy on or before the APRIL CLINIC. Should any changes occur in Officer or Chairperson addresses, please notify the Grand Secretary's Office and your District Deputy at once.

PLEASE USE FULL NAMES. INCLUDE AREA CODE FOR ALL PHONE NUMBERS; AND IF P.O. BOX IS USED, BE SURE TO ADD A STREET ADDRESS FOR UPS DELIVERY. GIVE 9-DIGIT ZIP CODE WHENEVER KNOWN.

LODGE NAME: _____ NO: _____ DISTRICT: _____ STATE: _____

EXALTED RULER-ELECT: _____ Res: () _____
Member No.

Address: _____ Bus: () _____

City: _____ State: _____ Zip Code: _____ Email: _____

UPS Address: _____

AUDITING & ACCOUNTING CHAIRPERSON

PHONE NUMBERS

AUDITING: _____ Res: () _____
[Sec. 13.040] Member No.

Address: _____ Bus: () _____

City: _____ State: _____ Zip Code: _____ Email: _____

UPS Address: _____

COMMUNITY ACTIVITIES CHAIRPERSON

PHONE NUMBERS

COMMUNITY ACTIVITIES: _____ Res: () _____
[Sec. 13.150] Member No.

Address: _____ Bus: () _____

City: _____ State: _____ Zip Code: _____ Email: _____

UPS Address: _____

ELKS NATIONAL FOUNDATION CHAIRPERSON

PHONE NUMBERS

NATIONAL FOUNDATION: _____ Res: () _____
[Sec. 13.120] Member No.

Address: _____ Bus: () _____

City: _____ State: _____ Zip Code: _____ Email: _____

UPS Address: _____

Lodge Name (with state) and Number:

PHONE NUMBERS

LODGE ACTIVITIES

CHAIRPERSON: _____ Res: () _____
[Sec. 13.091] Member No.

Address: _____ Bus: () _____

City: _____ State: _____ Zip Code: _____ Email: _____

UPS Address: _____

PHONE NUMBERS

AMERICANISM COORDINATOR: _____ Res: () _____
[Sec. 13.030] Member No.

Address: _____ Bus: () _____

City: _____ State: _____ Zip Code: _____ Email: _____

UPS Address: _____

PHONE NUMBER

FLAG DAY COORDINATOR: _____ () _____
[Sec. 13.050] (Contact at Lodge address) Member No.

PHONE NUMBERS

GOVERNMENT RELATIONS

COORDINATOR: _____ Res: () _____
[Sec. 13.060] Member No.

Address: _____ Bus: () _____

City: _____ State: _____ Zip Code: _____ Email: _____

UPS Address: _____

PHONE NUMBER

MEMORIAL DAY COORDINATOR: _____ () _____
[Sec. 13.110] (Contact at Lodge address) Member No.

PHONE NUMBERS

NATIONAL VETERANS

SERVICE COORDINATOR: _____ Res: () _____
[Sec. 13.130] Member No.

Address: _____ Bus: () _____

City: _____ State: _____ Zip Code: _____ Email: _____

UPS Address: _____

PHONE NUMBERS

PER ASSOCIATION

PRESIDING OFFICER: _____ Res: () _____
[Sec. 13.190] Member No.

Address: _____ Bus: () _____

City: _____ State: _____ Zip Code: _____ Email: _____

UPS Address: _____

Lodge Name (with state) and Number:

PHONE NUMBERS

PUBLIC RELATIONS COORDINATOR:

[Sec. 13.140]

Member No.

Res: () _____

Address: _____ Bus: () _____

City: _____ State: _____ Zip Code: _____ Email: _____

UPS Address: _____

PHONE NUMBERS

VISITING COMMITTEE COORDINATOR:

[Sec. 13.160]

Member No.

Res: () _____

Address: _____ Bus: () _____

City: _____ State: _____ Zip Code: _____ Email: _____

UPS Address: _____

MEMBERSHIP

PHONE NUMBERS

MEMBERSHIP CHAIRPERSON:

[Sec. 13.100]

Member No.

Res: () _____

Address: _____ Bus: () _____

City: _____ State: _____ Zip Code: _____ Email: _____

UPS Address: _____

PHONE NUMBERS

INDOCTRINATION/ ORIENTATION COORDINATOR:

[Sec. 13.070]

Member No.

Res: () _____

Address: _____ Bus: () _____

City: _____ State: _____ Zip Code: _____ Email: _____

UPS Address: _____

PHONE NUMBERS

INVESTIGATION/ INTERVIEW COORDINATOR:

[Sec. 13.080]

Member No.

Res: () _____

Address: _____ Bus: () _____

City: _____ State: _____ Zip Code: _____ Email: _____

UPS Address: _____

PHONE NUMBERS

LAPSATION COORDINATOR:

[Sec. 13.090]

Member No.

Res: () _____

Address: _____ Bus: () _____

City: _____ State: _____ Zip Code: _____ Email: _____

UPS Address: _____

PHONE NUMBERS

**YOUTH ACTIVITIES
CHAIRPERSON:**

[Sec. 13.170] _____ Res: () _____
Member No.

Address: _____ Bus: () _____

City: _____ State: _____ Zip Code: _____ Email: _____

UPS Address: _____

PHONE NUMBERS

**DRUG AWARENESS
COORDINATOR:**

[Sec. 13.041] _____ Res: () _____
Member No.

Address: _____ Bus: () _____

City: _____ State: _____ Zip Code: _____ Email: _____

UPS Address: _____

PHONE NUMBERS

**"HOOP SHOOT®"
COORDINATOR:**

[Sec. 13.061] _____ Res: () _____
Member No.

Address: _____ Bus: () _____

City: _____ State: _____ Zip Code: _____ Email: _____

UPS Address: _____

PHONE NUMBERS

**"SOCCER SHOOT®"
COORDINATOR:**

_____ Res: () _____
Member No.

Address: _____ Bus: () _____

City: _____ State: _____ Zip Code: _____ Email: _____

UPS Address: _____

PHONE NUMBERS

**ACCIDENT PREVENTION
MANAGER:**

[Sec. 12.070] _____ Res: () _____
Member No.

Address: _____ Bus: () _____

City: _____ State: _____ Zip Code: _____ Email: _____

UPS Address: _____

RELIEF [2011-2012 Officers]
[Sec. 13.010]

1. Exalted Ruler: _____ Member No. 4. Lecturing Knight: _____ Member No.

2. Leading Knight: _____ Member No. 5. Secretary: _____ Member No.

3. Loyal Knight: _____ Member No. 6. Treasurer: _____ Member No.

Lodge Name (with state) and Number: _____

EXALTED RULER-ELECT & SECRETARY: COMPLETE IMMEDIATELY AND RETURN TO YOUR DISTRICT DEPUTY