

CHAPTER OFFICERS ELECTION REPORT

To: SOLE - The International Society of Logistics
 8100 Professional Place
 Suite 111
 Hyattsville, MD 20785



District _____
 Chapter _____
 Date _____

Our Chapter Officers for the Program Year _____ are: *

OFFICERS **			
CHAIRMAN	Member No. _____	Home Phone _____	
_____	_____	Business Phone _____	
_____	_____	Fax No. _____	
_____	_____	E-Mail _____	
VICE CHAIRMAN	Member No. _____	Home Phone _____	
_____	_____	Business Phone _____	
_____	_____	Fax No. _____	
_____	_____	E-Mail _____	
VICE CHAIRMAN FINANCE	Member No. _____	Home Phone _____	
_____	_____	Business Phone _____	
_____	_____	Fax No. _____	
_____	_____	E-Mail _____	
VICE CHAIRMAN ADMIN	Member No. _____	Home Phone _____	
_____	_____	Business Phone _____	
_____	_____	Fax No. _____	
_____	_____	E-Mail _____	
LEF REPRESENTATIVE	Member No. _____	Home Phone _____	
_____	_____	Business Phone _____	
_____	_____	Fax No. _____	
_____	_____	E-Mail _____	
OTHER OFFICERS (show all; use attachment, as necessary)			
_____	Member No. _____	Home Phone _____	
_____	_____	Business Phone _____	
_____	_____	Fax No. _____	
_____	_____	E-Mail _____	
_____	Member No. _____	Home Phone _____	
_____	_____	Business Phone _____	
_____	_____	Fax No. _____	
_____	_____	E-Mail _____	
_____	Member No. _____	Home Phone _____	
_____	_____	Business Phone _____	
_____	_____	Fax No. _____	
_____	_____	E-Mail _____	
<p>NOTES: * Please print or type name, membership number, and mailing address. If you do not wish to have this information published, please so indicate by checking the box at the line end. ** Send copy of this form to your District Director NLT June 30th.</p>			