

## SOCIETY OFFICER REPORT FORM - 2018/2019

**TO: SOCIETY PRESIDENTS**

Your Zone needs your help in gathering information on officers for the LWML South Dakota directory. Please complete this form as it applies to your society. **Current information** helps keep communication lines open and our historical records accurate. Please complete the form for the upcoming year as soon after election as possible, or at least **by January 15th** and mail or email it to your Zone Secretary. (info below) Thank you!

Zone Secretary \_\_\_\_\_  
 Address \_\_\_\_\_  
 Phone \_\_\_\_\_  
 Email \_\_\_\_\_

**NAME OF ZONE** \_\_\_\_\_

**NAME OF SOCIETY** \_\_\_\_\_ **CITY OF SOCIETY** \_\_\_\_\_ **# OF MEMBERS** \_\_\_\_\_

**NAME OF CHURCH** \_\_\_\_\_ **CHURCH ADDRESS** \_\_\_\_\_

**PASTOR'S NAME** \_\_\_\_\_ **CHURCH CITY** \_\_\_\_\_ **PHONE** \_\_\_\_\_

SOCIETY OFFICERS	NAME	MAILING ADDRESS	CITY	ZIP	PHONE
PRESIDENT					
EMAIL CONTACT & TITLE (office)	Email address: _____				
VICE PRESIDENT					
SECRETARY					
TREASURER					
CHRISTIAN LIFE					
SERVANT RESOURCES					
HUMAN CARE					
GOSPEL OUTREACH					
ARCHIVIST/HISTORIAN					