



# LIONESS CLUB OFFICER REPORT FORM

## 2017-2018 MD19 ROSTER INFORMATION

**PLEASE RETURN BY APRIL 30TH**

NEEDED FOR THE MULTIPLE DISTRICT 19 ROSTER

SEND TO: **MD19 LIONS OFFICE**  
4141 W MAPLEWOOD AVE.  
BELLINGHAM, WA 98226

MAKE A COPY AND SEND TO **Your Zone chairperson & current 1<sup>st</sup> VDG**

**TYPE OR PRINT CAREFULLY AND IN COMPLETE DETAIL**

NAME OF CLUB \_\_\_\_\_ DISTRICT/ZONE \_\_\_\_\_

NAME OF SPONSORING LIONS CLUB \_\_\_\_\_

TIME OF MEETING \_\_\_\_\_  A.M.  P.M. MEETING ENDS AT \_\_\_\_\_

MEETING PLACE \_\_\_\_\_

ADDRESS \_\_\_\_\_

WEEKLY  
 1ST & 3RD DAY OF WEEK \_\_\_\_\_  
 2ND & 4TH

**Please check with incoming officers to make sure the addresses below are correct as this is where the MD19 Office will send all correspondence.**

**PRESIDENT:**

NAME \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_

STATE / PROVINCE, ZIP / POSTAL CODE \_\_\_\_\_

(AREA CODE) (RESIDENCE PHONE) \_\_\_\_\_

(AREA CODE) (BUSINESS PHONE) \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_

**SECRETARY:**

NAME \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_

STATE / PROVINCE, ZIP / POSTAL CODE \_\_\_\_\_

(AREA CODE) (RESIDENCE PHONE) \_\_\_\_\_

(AREA CODE) (BUSINESS PHONE) \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_

**TREASURER:**

NAME \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_

STATE / PROVINCE, ZIP / POSTAL CODE \_\_\_\_\_

(AREA CODE) (RESIDENCE PHONE) \_\_\_\_\_

(AREA CODE) (BUSINESS PHONE) \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_