



# LEO CLUB OFFICER REPORT FORM

(formerly the PU19)

## 2005-2006 MD19 ROSTER INFORMATION

PLEASE RETURN BY APRIL 30<sup>TH</sup>.

PLEASE SEND: 1 COPY TO You Zone Chairperson & VDG (District Governor-Elect) 1 COPY TO: **MD19 LIONS OFFICE**  
P.O. BOX 66  
BELLINGHAM, WA 98227

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  
 2ND & 4TH DAY OF WEEK \_\_\_\_\_

**PRESIDENT:**

NAME \_\_\_\_\_

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

CITY \_\_\_\_\_

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

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

(AREA CODE) (FAX) \_\_\_\_\_

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

**LEO CLUB ADVISOR:**

NAME \_\_\_\_\_

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

CITY \_\_\_\_\_

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

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

(AREA CODE) (FAX) \_\_\_\_\_

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

**LIONS LIASION:** (if different from advisor)

NAME \_\_\_\_\_

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

CITY \_\_\_\_\_

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

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

(AREA CODE) (FAX) \_\_\_\_\_

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