

CLUBS & UNITS HEADS – OSMAN SHRINE NOBLES ELECTED AS OFFICERS

**Please return immediately after the annual ELECTION OF OFFICERS.
PLEASE RETURN BY DECEMBER 24TH.**

UNIT/CLUB _____

Membership Total at end of Year _____ Regular meetings held on _____

President, Captain, Commander, etc.

Name _____ (lady's first Name) _____

Home Address _____

City _____ State _____ Zip Code _____

Phone Numbers (____) _____ (home) (____) _____ (business)

(____) _____ (cell) Email _____

Vice President, Co-Captain, Vice Commander, etc.

Name _____ (lady's first name) _____

Home Address _____

City _____ State _____ Zip Code _____

Phone Numbers (____) _____ (home) (____) _____ (business)

(____) _____ (cell) Email _____

Secretary

Name _____ (lady's first name) _____

Home Address _____

City _____ State _____ Zip Code _____

Phone Numbers (____) _____ (home) (____) _____ (business)

(____) _____ (cell) Email _____

Treasurer

Name _____ (lady's first name) _____

Home Address _____

City _____ State _____ Zip Code _____

Phone Numbers (____) _____ (home) (____) _____ (business)

(____) _____ (cell) Email _____

Send to: Osman Shrine, 2750 Sibley Memorial Hwy., St Paul, MN 55121

Remember to also mail your current Membership Roster and parade schedule.