

OREA LOCAL UNIT OFFICERS & COMMITTEE CHAIRS

Year _____ Unit _____ Date of Election _____

Please circle months your unit will meet: July Aug. Sept. Oct. Nov. Dec. Jan. Feb. March April May June

Meeting Time: Day of the Week _____ Week of the Month _____ Time _____

Meeting Place or Places _____ Average Attendance _____

Officers	Name	Street Address or Box	Town	Zip	Telephone and/or E-mail
President					
President-Elect (if one)					
Vice President					
Secretary					
Treasurer					
Membership Chair					
Legislative Chair					
Program Chair					
Public Relations/ Health Care					
Community Ser- vice/Volunteer Coordinator					

Mail to:
OREA • P.O. Box 18485 • Oklahoma City, OK 73154 • Attn: Sharon Cox

Please list e-mail addresses on reverse
side if necessary

PLEASE SUBMIT THIS FORM AS SOON AS YOUR NEW OFFICERS ARE ELECTED.
THESE NAMES WILL BE IN EFFECT SEPTEMBER 1, 2010 THROUGH AUGUST 31, 2011.