

Zone Officer Roster

**Lutheran Women’s Missionary League
Washington-Alaska District**

Date Sent: _____

This information is used to update the District Roster to mail the *Evergreen Echoes* and other pertinent information, determine equalization, and update district statistics in LWML.

Instructions to Zone: *Complete after any new officers are elected or appointed.* Email (or mail) one copy as soon as possible to the *District Corresponding Secretary:*

LeeAnn Tibbals, 945 N Cleveland St, Moscow, ID 83843 or mygrandmaleeann@gmail.com

Note: If there are other officers not listed, include the same information requested as the other officers on the back of this form.

Zone Name: _____

Home Phone: (____) _____

President: _____

FAX: (____) _____

Street Address: _____

E-Mail: _____

City, State, Zip: _____

Husband's name: _____

Election Term: _____ TO _____
(Date in MM/YYYY)

Vice-President: _____

Home Phone: (____) _____

Street Address: _____

FAX: (____) _____

City, State, Zip: _____

E-Mail: _____

Election Term: _____ TO _____
(Date in MM/YYYY)

Husband's name: _____

Secretary: _____

Home Phone: (____) _____

Street Address: _____

FAX: (____) _____

City, State, Zip: _____

E-Mail: _____

Election Term: _____ TO _____
(Date in MM/YYYY)

Husband's name: _____

Treasurer: _____

Home Phone: (____) _____

Street Address: _____

FAX: (____) _____

City, State, Zip: _____

E-Mail: _____

Election Term: _____ TO _____
(Date in MM/YYYY)

Husband's name: _____

Christian Life Chair: _____

Home Phone: (____) _____

Street Address: _____

FAX: (____) _____

City, State, Zip: _____

E-Mail: _____

Election Term: _____ TO _____
(Date in MM/YYYY)

Husband's name: _____

Pastoral Counselor: _____

Church Phone: (____) _____

Church: _____

Church FAX: (____) _____

Church Address: _____

Church E-Mail: _____

City, State, Zip: _____

Pastor’s E-mail: _____

Election Month: _____

Wife's Name _____