Send one copy to Family Living Agent and one to Center Chairman directly after first meeting of the year.

Local Organization

County: _____ Club: _____

Center: _____ Center Chairman _____

Beginning: _____ and ending: _____
(Month – day – year) (Month – day – year)

Officers:	**Name:**	**Address:**	**Phone #**
President:			
Vice President for Program			
Vice President for Public Policy			
Secretary			
Treasurer			

Our regular club meeting is _____ Of each month. Time: _____

Project (List month and topic in space provided)	**Leader's Name**	**Address**	**Telephone #**