

District Board Membership		
Designated Meeting Date, Time, & Place _____		
President/Chair:	Term Expires (Mo/Day/Yr):	
P. O. Box/Street	First Full Term	
City:	Second Full Term	
Zip Code:	Third or more Full Term	
Telephone:	Filling Unexpired Term	
Vice President:	Term Expires (Mo/Day/Yr):	
P. O. Box/Street	First Full Term	
City:	Second Full Term	
Zip Code:	Third or more Full Term	
Telephone:	Filling Unexpired Term	
Secretary:	Term Expires (Mo/Day/Yr):	
P. O. Box/Street	First Full Term	
City:	Second Full Term	
Zip Code:	Third or more Full Term	
Telephone:	Filling Unexpired Term	
Treasurer:	Term Expires (Mo/Day/Yr):	
P. O. Box/Street	First Full Term	
City:	Second Full Term	
Zip Code:	Third or more Full Term	
Telephone:	Filling Unexpired Term	
Member:	Term Expires (Mo/Day/Yr):	
P. O. Box/Street	First Full Term	
City:	Second Full Term	
Zip Code:	Third or more Full Term	
Telephone:	Filling Unexpired Term	

Member:	Term Expires (Mo/Day/Yr):	
P. O. Box/Street	First Full Term	<input type="text"/>
	Second Full Term	<input type="text"/>
City:	Third or more Full Term	<input type="text"/>
	Filling Unexpired Term	<input type="text"/>
Zip Code:		
Telephone:		
Member:	Term Expires (Mo/Day/Yr):	
P. O. Box/Street	First Full Term	<input type="text"/>
	Second Full Term	<input type="text"/>
City:	Third or more Full Term	<input type="text"/>
	Filling Unexpired Term	<input type="text"/>
Zip Code:		
Telephone:		
Member:	Term Expires (Mo/Day/Yr):	
P. O. Box/Street	First Full Term	<input type="text"/>
	Second Full Term	<input type="text"/>
City:	Third or more Full Term	<input type="text"/>
	Filling Unexpired Term	<input type="text"/>
Zip Code:		
Telephone:		
Member:	Term Expires (Mo/Day/Yr):	
P. O. Box/Street	First Full Term	<input type="text"/>
	Second Full Term	<input type="text"/>
City:	Third or more Full Term	<input type="text"/>
	Filling Unexpired Term	<input type="text"/>
Zip Code:		
Telephone:		
Member:	Term Expires (Mo/Day/Yr):	
P. O. Box/Street	First Full Term	<input type="text"/>
	Second Full Term	<input type="text"/>
City:	Third or more Full Term	<input type="text"/>
	Filling Unexpired Term	<input type="text"/>
Zip Code:		
Telephone:		