

STATE & CHAPTER OFFICER ELECTION NOTIFICATION

TO: AAMA
Attn: Nick Mickowski
20 N. Wacker Dr., Suite 1575
Chicago, IL 60606

Email: OfficerNotification@aama-ntl.org
Phone: 800/228-2262 (Ext. 181)
Fax: 312/635-3468

FROM: _____

OFFICE/POSITION TITLE: _____

WORK/DAYTIME PHONE: (_____) _____

EMAIL: _____ **DATE:** _____

Check one:

STATE: _____

CHAPTER: _____

President

Name & Member ID#

Address

City, State, ZIP Code

Email

Home Phone

Treasurer

Name & Member ID#

Address

City, State, ZIP Code

Email

Home Phone

President-Elect/Vice President

Name & Member ID#

Address

City, State, ZIP Code

Email

Home Phone

Secretary

Name & Member ID#

Address

City, State, ZIP Code

Email

Home Phone

Membership Chair/Contact

Name & Member ID#

Address

City, State, ZIP Code

Email

Home Phone

Additional Membership Contact:

Name & Member ID#

Address

City, State, ZIP Code

Email

Home Phone

Public Affairs Contact:

Name & Member ID#

Address

City, State, ZIP Code

Email

Home Phone

Additional Public Affairs Contact:

Name & Member ID#

Address

City, State, ZIP Code

Email

Home Phone

Marketing Chair/Contact

Name & Member ID#

Address

City, State, ZIP Code

Email

Home Phone

Additional Marketing Contact:

Name & Member ID#

Address

City, State, Zip Code

Email

Home Phone