Subordinate Chapter Officer Election Form (Due Immediately After Elections via Mail or Email)

Chapter Name			Chapter No:	
Chapter City			South Dakota	
Elections were	held on this Date:		I	
Installation is se	cheduled for this Date:			
mstanation is st	medica for this bate.			
after elections a the scanned cop which officers (i	re held. If you are ser by. Please provide the	nding it via email pleas information list below	smit to the Grand Secretary immedia be ensure the Chapter Seal is visible of for each elected officer. Please indica opointed officer information will be	on
Worthy Matron	Name Street/City/Zip Cell & Home Phone Email			
Worthy Patron	Name Street/City/Zip Cell & Home Phone Email			
Assoc. Matron	Name Street/City/Zip Cell & Home Phone Email			
Assoc. Patron	Name Street/City/Zip Cell & Home Phone Email			
Secretary	Name Street/City/Zip Cell & Home Phone Email			
Treasurer	Name Street/City/Zip Cell & Home Phone Email			
Conductress	Name Street/City/Zip Cell & Home Phone Email			
Assoc. Cond.	Name Street/City/Zip Cell & Home Phone Email			
Date				

(Chapter Seal)