

WASHINGTON STATE SCHOOL RETIREES' ASSOCIATION  
2009-2010 UNIT OFFICERS AND COMMITTEE CHAIRS COMPILATION

This list is used for statewide mailings:  
Complete information is requested. Do not assume we already have the information

Unit Name \_\_\_\_\_ Unit # \_\_\_\_\_

	<b>NAME</b>	<b>ADDRESS</b>	<b>AREA CODE AND PHONE NO.</b>
PRESIDENT	_____	_____	_____
VICE-PRESIDENT	_____	_____	_____
SECRETARY	_____	_____	_____
TREASURER	_____	_____	_____

	<b>NAME</b>	<b>ADDRESS</b>	<b>AREA CODE AND PHONE NO.</b>
<u>COMMITTEE CHAIRS</u> ( <i>we only need these that match WSSRA state committees</i> ):			
HEALTH SERVICES	_____	_____	_____
LEGISLATIVE	_____	_____	_____
MEMBERSHIP	_____	_____	_____
RETIREMENT PLANNING	_____	_____	_____
OUTREACH	_____	_____	_____

(Please complete backside)

MEETINGS: Accuracy is important -- this information is made available to WSSRA Board members..

Number of events per year \_\_\_\_\_ Time of meetings: \_\_\_\_\_

Dates of meetings: \_\_\_\_\_

Place of meetings (also address if known) \_\_\_\_\_

Submitted by (name and title) \_\_\_\_\_

Date completed: \_\_\_\_\_

**VERY IMPORTANT --Email addresses of officers** – please be extra careful. A misplaced dot or dash renders it useless. **Please take time to provide this.** Ask officers to let the WSSRA office know of any changes.

President:

Membership:

Vice-President:

Legislative:

Secretary:

Retirement Planning:

Treasurer:

Newsletter Editor:

Health Services:

Outreach: