## GREA LOCAL UNIT OFFICER INFORMATION SHEET 20\_\_\_\_\_\_ The President and President-Elect must be a GREA Member

PLEASE COMPLETE AND MAIL OR EMAIL 1 COPY TO YOUR AREA DIRECTOR AND 1 COPY TO THE STATE OFFICE P.O. BOX 1379, FLOWERY BRANCH, GA 30542 (grea3@grea3.org) ON OR BEFORE **JUNE 1st**.

Name of local unit as it should be listed \_\_\_\_\_\_ AREA\_\_\_\_\_

Title	Nan	ne		Telepho	one		E-mail Add	iress
President								
Mailing Address								
President-elect								
Membership Chr.								
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Legislative Chr.  ease provide the information for the cation (Restaurant, school, etc.):		ings.						
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ease provide the information for the cation (Restaurant, school, etc.):	JUL JAN	AUG FEB			MAY		4 <sup>th</sup> week	
ease provide the information for the cation (Restaurant, school, etc.): _ neck the months the unit meets	JUL JAN the unit mee	AUG FEB	MAR	APR	MAY	JUN	4 <sup>th</sup> week FRI	SAT
ease provide the information for the cation (Restaurant, school, etc.): _ eck the months the unit meets ick the circle next week in which	JUL JAN the unit mee he week the	AUG FEB	MAR L <sup>st</sup> week MON	APR 2 <sup>nd</sup> week TUES	MAY 3 <sup>rd</sup>	JUN week THU		