



Affiliate Chapter Officers

The President and Vice President(s) must be FULL members of NABJ.

Name _____

President Name _____

Address _____

Phone Number _____

Fax Number _____

E-mail Address _____

NABJ Membership Number _____

Vice President Name _____

Address _____

Phone Number _____

Fax Number _____

E-mail Address _____

NABJ Membership Number _____

Treasurer Name _____

Address _____

Phone Number _____

Fax Number _____

E-mail Address _____

NABJ Membership Number _____

Secretary Name _____

Address _____

Phone Number _____

Fax Number _____

E-mail Address _____

NABJ Membership Number _____

Parliamentarian Name _____

Address _____

Phone Number _____

Fax Number _____

E-mail Address _____

NABJ Membership Number _____

Other Officers

In accordance to the NABJ Constitution Chapter 7 Section 4; please list the names of officers with countersignature authority for all bank checks, funds distribution, purchases, etc.

Officer Name _____ Officer Title _____

Officer Name _____ Officer Title _____