



Order of Ahepa

District Officers Election Results

This is to certify that on the _____ day of _____, District # _____

located at _____ elected the following members in good standing

to the offices below :

District Governor :

Name : _____ National Serial No. _____

Address : _____

Home # : _____ Business # : _____

Fax # : _____ E-mail : _____

District Lt. Governor :

Name : _____ National Serial No. _____

Address : _____

Home # : _____ Business # : _____

Fax # : _____ E-mail : _____

District Secretary :

Name : _____ National Serial No. _____

Address : _____

Home # : _____ Business # : _____

Fax # : _____ E-mail : _____

District Treasurer :

Name : _____ National Serial No. _____

Address : _____

Home # : _____ Business # : _____

Fax # : _____ E-mail : _____

District Warden :

Name : _____ National Serial No. _____

Address : _____

Home # : _____ Business # : _____

Fax # : _____ E-mail : _____

District Marshall :

Name : _____ National Serial No. _____

Address : _____

Home # : _____ Business # : _____

Fax # : _____ E-mail : _____

District Athletic Director :

Name : _____ National Serial No. _____

Address : _____

Home # : _____ Business # : _____

Fax # : _____ E-mail : _____

Sons District Advisor :

Name : _____ National Serial No. _____

Address : _____

Home # : _____ Business # : _____

Fax # : _____ E-mail : _____

District Secretary _____ Date _____
(Signature)

PLEASE REMIT IMMEDIATELY FOLLOWING ELECTION

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