BRANCH OFFICERS' LIST 2020 BRANCH NO._____

ADDRESS:_____

MEETING DAY/TIME: (1ST, 2ND, 3RD, 4TH)_____ TIME:_____

MEMBER NUMBER	CODE & TITLE	NAME ADDRESS	CITY, STATE, ZIP	AREA CODE TELEPHONE	FAX # AND/OR E-MAIL ADDRESS
	A	ADDRESS	GITT, STATE, ZIF	TELEFITONE	
	A Chaplain				
	B President				
	C 1 st Vice				
	D 2 nd Vice				
	E Record. Secretary				
	F (optional) Corres. Secretary				
	G Financial Secretary				
	H (optional) Treasurer				
	l Orator				
	J Trustee				
	J (optional) Trustee				
	J (optional) Trustee				
	K Sentinel				
	Branch Deputy				