



Order of AHEPA CHAPTER ELECTION RESULTS

This is to certify that on the _____ day of _____ 20 _____, Chapter # _____ District # _____ located at _____ elected the following members, in good standing, to these offices:

CHAPTER PRESIDENT

Name: _____ National Serial # _____

Address: _____ City _____ State _____ Zip _____

Telephone (H) _____ (W) _____ (Fax) _____ (E-mail) _____

CHAPTER VICE PRESIDENT

Name: _____ National Serial # _____

Address: _____ City _____ State _____ Zip _____

Telephone (H) _____ (W) _____ (Fax) _____ (E-mail) _____

CHAPTER SECRETARY

Name: _____ National Serial # _____

Address: _____ City _____ State _____ Zip _____

Telephone (H) _____ (W) _____ (Fax) _____ (E-mail) _____

CHAPTER TREASURER

Name: _____ National Serial # _____

Address: _____ City _____ State _____ Zip _____

Telephone (H) _____ (W) _____ (Fax) _____ (E-mail) _____

PLEASE REMIT NO LATER THAN JUNE 30 TO:

AHEPA HEADQUARTERS

1909 Q Street, N.W., Suite 500

Washington, D.C. 20009

Phone: 202.232.6300 Fax 202.232.2140

Website: www.ahepa.org Email: ahepa@ahepa.org

CHAPTER VICE PRESIDENT OF HELLENISM

Name: _____ National Serial # _____

Address: _____ City _____ State _____ Zip _____

Telephone (H) _____ (W) _____ (Fax) _____ (E-mail) _____

CHAPTER VICE PRESIDENT OF PHILANTHROPY

Name: _____ National Serial # _____

Address: _____ City _____ State _____ Zip _____

Telephone (H) _____ (W) _____ (Fax) _____ (E-mail) _____

CHAPTER VICE PRESIDENT OF EDUCATION

Name: _____ National Serial # _____

Address: _____ City _____ State _____ Zip _____

Telephone (H) _____ (W) _____ (Fax) _____ (E-mail) _____

CHAPTER VICE PRESIDENT OF CIVIC RESPONSIBILITY

Name: _____ National Serial # _____

Address: _____ City _____ State _____ Zip _____

Telephone (H) _____ (W) _____ (Fax) _____ (E-mail) _____

CHAPTER VICE PRESIDENT OF FAMILY AND INDIVIDUAL EXCELLENCE

Name: _____ National Serial # _____

Address: _____ City _____ State _____ Zip _____

Telephone (H) _____ (W) _____ (Fax) _____ (E-mail) _____

APPOINTED OFFICERS (list names)

1. _____ 2. _____

3. _____ 4. _____

5. _____ 6. _____

BOARD OF GOVERNORS

CHAIRMAN _____

GOVERNOR _____

GOVERNOR _____

Signed: _____ or _____

President

Chapter Secretary