NATIONAL ORDER OF TRENCH RATS OFFICERS REPORT

(Please type or print. All spaces must be filled in.)

DATE DATE OF ANNU	AL ELECTION	DATE OF INSTALLATION
SECTOR/DUGOUT NAME		DUGOUT#
LOCATION: CITY, STATE, ZIP CODE		
ADDRESS OF REGULAR MEETING	TELEPHONE NUMBER	
TIME, DAY, AND WEEK OF MONTH OF REGULAR MEETINGS	,	
OFFICERS ELECTED FOR YEAR BEGINNING	ENDING	
GOLDEN RODENT NAME:	SILVER RODENT NAME	
MAILING ADDRESS: STREET NAME & NUMBER OR P.O.BOX	MAILING ADDRESS: STREET NAME& NUMBER OR P.O.BOX	
CITY, STATE, ZIP CODE	CITY, STATE, ZIP CODE	
NOTR MEMBERSHIP #	NOTR MEMBERSHIP #	
TELEPHONE NUMBER	TELEPHONE NUMBER	
BLUE RODENT NAME:	RED EYED GNAWER NAME	
MAILING ADDRESS: STREET NAME & NUMBER OR P.O.BOX	MAILING ADDRESS: STREET NAI	ME& NUMBER OR P.O.BOX
CITY, STATE, ZIP CODE	CITY, STATE, ZIP CODE	
NOTR MEMBERSHIP #	NOTR MEMBERSHIP #	
TELEPHONE NUMBER	TELEPHONE NUMBER	
ONLY REG WILL RECEIVE MAIL: A new Officers Report is due within (15) days after installation of officers or any changes of officers listed this report! Failure to comply may cause suspension or revocation of dugout charter! DO NOT LEAVE BLANK BOXES!!! Report must be Signed by both Golden Rodent & REG. Send to proper office.	THE PRECEEDING NAMES & POSITIONS ARE CERTIFIED. I HAVE VERIFIED MEMBERSHIP CARDS & ALL OFFICERS ARE IN GOOD STANDING. GOLDEN RODENT	
		REG
	FORM MUST BE CERTIFIED BY T RODENT AND REG.	
Copy To: IMPERIAL HEADQUARTERS P.O.BOX 500208 MALABAR, FL 32950	SECTOR	DUGOUT