

## AFE Chapter Officer Update Form

Please submit this form to the AFE National Office each year by December 31 or whenever there is a change in Chapter officers.

Monthly Scheduled Meeting Day \_\_\_\_\_ Time \_\_\_\_\_

Chapter President: \_\_\_\_\_

Email \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Vice President: \_\_\_\_\_

Email \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Treasurer: \_\_\_\_\_

Email \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: \_\_\_\_\_

Email \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

***Use reverse side if needed.***

Updated By: \_\_\_\_\_ Contact Email Address: \_\_\_\_\_

Please return to AFE Corporate Office by one of the following methods:

Email to: [tthomashall@AFE.org](mailto:tthomashall@AFE.org)

Fax to: (571-766-2142; or call Talisa Thomas-Hall at 571/203-7236

Mail to: AFE, 12801 Worldgate Dr, Suite 500, Herndon, VA 20170

# AFE Chapter Officer Update Form

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## Other Officers:

Membership Chair: \_\_\_\_\_

Email \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Past President: \_\_\_\_\_

Email \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

(Title) \_\_\_\_\_ (Name) \_\_\_\_\_

Email \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

(Title) \_\_\_\_\_ (Name) \_\_\_\_\_

Email \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

(Title) \_\_\_\_\_ (Name) \_\_\_\_\_

Email \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Updated By: \_\_\_\_\_ Contact Email Address: \_\_\_\_\_

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