

Roster Of Club Committee Chairs

Term begins _____ Term ends _____

Altrusa International, Inc. of _____ District _____

Please print or type. See your membership printout for identification numbers.

ASTRA Member ID# _____

Name _____

Address _____

City/State/Code _____

Telephone _____ Fax _____

E-mail _____

COMMUNICATIONS Member ID# _____

Name _____

Address _____

City/State/Code _____

Telephone _____ Fax _____

E-mail _____

FINANCES Member ID# _____

Name _____

Address _____

City/State/Code _____

Telephone _____ Fax _____

E-mail _____

MEMBERSHIP DEVELOPMENT Member ID# _____

Name _____

Address _____

City/State/Code _____

Telephone _____ Fax _____

E-mail _____

NOMINATING Member ID# _____

Name _____

Address _____

City/State/Code _____

Telephone _____ Fax _____

E-mail _____

SERVICE Member ID# _____

Name _____

Address _____

City/State/Code _____

Telephone _____ Fax _____

E-mail _____

Date ____/____/____

Name _____

Address _____

City/State/Code _____

LITERACY Member ID# _____

Name _____

Address _____

City/State/Code _____

Telephone _____ Fax _____

E-mail _____

**IMPORTANT: Return to Altrusa International, Inc. at 332 S. Michigan Ave, Ste. 1123
Chicago, IL 60604-4305**