State Rep Work Sheet District

District :	#					
Date Dis	st Meeting					
Hosting						
Post #	Post Name	Commander	SR. Vice	JR. Vice	Other	# Member Attending
			_			
Did		Circle	e One	П		
Did you meet with Dist and Post Commanders		Yes	No			
Notes:				<u> </u>		
Date of N	lext Dist				<u> </u>	
Meeting				Lunch Time		
Post # of Next Meeting				Meeting Time		
	I				1	
State Rep	Name Print					
State Re	o Signature					

Note: Please return to State Headquarters no later than 2 weeks after District Meeting