# DISTRICT CABINET OFFICERS REPORTING FORM

Lion Year 20_____ - 20_____ District _____

PLEASE PRINT OR TYPE

## Cabinet Secretary

Name: _____ _____ _____
First/Given Name Middle Initial Last/Family Name

Member Number: _____ Email: _____

Club Number: _____ Club Name: _____

Home Address: _____

_____ _____ _____
City State/Province/Country Postal/Zip Code

Billing Address: _____

_____ _____ _____
City State/Province/Country Postal/Zip Code

Telephone: (Bus)_____ (Res.)_____

Cell (mobile)_____ Fax: _____

## Cabinet Treasurer

☐ same as Cabinet Secretary

Name: _____ _____ _____
First/Given Name Middle Initial Last/Family Name

Member Number: _____ Email: _____

Club Number: _____ Club Name: _____

Home Address: _____

_____ _____ _____
City State/Province/Country Postal/Zip Code

Billing Address: _____

_____ _____ _____
City State/Province/Country Postal/Zip Code

Telephone: (Bus)_____ (Res.)_____

Cell (mobile)_____ Fax: _____

***Please send to:***

Lions Clubs International
English Language Department
300 West 22nd Street
Oak Brook, IL 60523-8842, USA
Email: englishlanguage@lionsclubs.org
Fax: 630-706-9273

Signature: _____ Date: _____
District Governor

DA-903 Rev 11.03.11