



LOCAL EXECUTIVE COMMITTEE CONTACT INFORMATION

The following information is required in order to contact your LEC when necessary.

Please complete this form, circulate it to your LEC and forward the completed form to your Regional Secretary.

LOCAL # _____ Single Unit Multi or Composite

Units in your Local (if multi or composite)

Regional Office: _____

Staff Rep: _____

Date of Election of Officers (General Membership Meeting) _____

OFFICER NAMES	Mailing Address	E-Mails	Telephones
<i>President</i>			
<i>Vice-President</i>			
<i>Secretary</i>			
<i>Treasurer</i>			
<i>Chief Steward (if single unit local)</i>			
<i>Unit Steward (if multi or composite)</i>			
<i>Unit Steward</i>			
<i>Unit Steward</i>			
<i>Unit Steward</i>			