



**National Active and Retired
Federal Employees Association**
606 North Washington Street
Alexandria, Virginia 22314-1914
(703) 838-7760 • FAX (703) 838-7783

NARFE Chapter Officer Roster

Term 20__ to 20__

INSTRUCTIONS:

**Note: This may be submitted online at
www.narfe.org/oam**

- PLEASE READ THIS ENTIRE FORM CAREFULLY BEFORE FILLING IT OUT.**
- Every office is assigned a specific code entered in the computer database in sequence to speed entry. Please do NOT change or type over titles not used by your chapter. Check box next to title if the officer listed is a new officer.
- This form must be submitted only by one of the following **chapter officers: President, 1st VP, Secretary, Secretary/Treasurer or Membership Chair.**
- All chapters are required, **by January 1 of each year**, to send a complete listing of all chapter officers (elected and appointed) and their chapter's dues to the **NARFE Office**, their **Federation President and Secretary**, and/or other requesters. Chapters are encouraged to report all changes in chapter officers and chapter dues changes whenever they occur.
- All chapter dues changes received at the National Office require the effective date of the dues change and require a minimum notice of **90 days** to become fully effective.
- All chapter officers are required to be a national and chapter member.
- This completed and signed form should be sent for processing to: NARFE Federation and Chapter Services F-7 Unit 606 N. Washington St. Alexandria, VA 22314-1914

Chapters are encouraged to submit their changes and required annual update to NARFE online. The online system saves time and eliminates errors and is automatically sent to the federation president and secretary. This paper form should be used only by chapters that do not have computer access for this required reporting.

President 1 New No change Vacant

Member # _____

Member Last Name _____

1st Vice President 2 New No change Vacant

Member # _____

Member Last Name _____

2nd Vice President 2A New No change Vacant

Member # _____

Member Last Name _____

3rd Vice President 2B New No change Vacant

Member # _____

Member Last Name _____

4th Vice President 2C New No change Vacant

Member # _____

Member Last Name _____

Secretary 3 New No change Vacant

Member # _____

Member Last Name _____

Treasurer 4 New No change Vacant

Member # _____

Member Last Name _____

Secretary/Treasurer 5 New No change Vacant

Member # _____

Member Last Name _____

Leg. Chair (Nat'l Legislation) 6 New No change Vacant

Member # _____

Member Last Name _____

Membership Chair 7 New No change Vacant

Member # _____

Member Last Name _____

Membership Chair Retention 7A

New No change Vacant

Member # _____

Member Last Name _____

Public Relations 8 New No change Vacant

Member # _____

Member Last Name _____

Service Officer 9 New No change Vacant

Member # _____

Member Last Name _____

Chapter Service Committee 10

New No change Vacant

Member # _____

Member Last Name _____

Newsletter Editor 11 New No change Vacant

Member # _____

Member Last Name _____

Alzheimer's Chair 12 New No change Vacant

Member # _____

Member Last Name _____

NARFE-PAC Chair 13 New No change Vacant

Member # _____

Member Last Name _____

Financial Secretary 14 New No change Vacant

Member # _____

Member Last Name _____

Other 15 New No change Vacant

Member # _____

Member Last Name _____

Other 15 New No change Vacant

Member # _____

Member Last Name _____

Other 15 New No change Vacant

Member # _____

Member Last Name _____

Other 15 New No change Vacant

Member # _____

Member Last Name _____

Other 15 New No change Vacant

Member # _____

Member Last Name _____

Network Coor. 16 New No change Vacant

Member # _____

Member Last Name _____

Network/Social Media Coordinator 16A

New No change Vacant

Member # _____

Member Last Name _____

Leg. Chair (State Legislation) 17

New No change Vacant

Member # _____

Member Last Name _____

Chapter Name _____

Chapter Number _____

Location _____

Meeting Place _____

Day and Time _____

Except for _____

(month)

(month)

(month)

Chapter Dues \$ _____ / per year

Check if dues amount changed

Effective Date _____

Submitted to Federation and Chapter Services By: _____ **Date** _____

Title: President 1st VP Secretary Secretary/Treasurer Membership Chair