

UPMA RETIRED STATE OFFICERS

STATE CHAPTER

Effective Date _____

(PLEASE PRINT ALL INFO)

PRESIDENT _____

Mailing Address _____ Email: _____

City/State/Zip _____

Home Phone: _____ Cell: _____

VICE PRESIDENT _____

Mailing Address _____ Email: _____

City/State/Zip _____

Home Phone: _____ Cell: _____

VICE PRESIDENT _____

Mailing Address _____ Email: _____

City/State/Zip _____

Home Phone: _____ Cell: _____

VICE PRESIDENT _____

Mailing Address _____ Email: _____

City/State/Zip _____

Home Phone: _____ Cell: _____

VICE PRESIDENT _____

Mailing Address _____ Email: _____

City/State/Zip _____

Home Phone: _____ Cell: _____

SECRETARY: _____

Mailing Address _____ Email: _____

City/State/Zip _____

Home Phone: _____ Cell: _____

TREASURER: _____

Mailing Address _____ Email: _____

City/State/Zip _____

Home Phone: _____ Cell: _____

PAC CHAIR: _____

Mailing Address _____ Email: _____

City/State/Zip _____

Home Phone: _____ Cell: _____

MEMBERSHIP CHAIR: _____

Mailing Address _____ Email: _____

City/State/Zip _____

Home Phone: _____ Cell: _____

NUMBER OF RETIREES ATTENDING STATE CONVENTION _____

PLEASE SUBMIT AS SOON AS STATE ELECTION IS COMPLETED TO:

**DEENA FRAKES
National Secretary
UPMA Retired
16255 SW Audubon Unit 102
Beaverton OR 97003
660-351-2444
dbfrakes@gmail.com**

MUST BE RECEIVED BY SEPTEMBER 1st of current year.