



**PILOT INTERNATIONAL
FORM FOR REPORTING DISTRICT OFFICERS**

Please complete and email to claire@pilothonline.org immediately following district convention.

District: _____ Year: _____

District Governor

(name) (address) (club)

(email) (contact phone)

District Governor Elect

(name) (address) (club)

(email) (contact phone)

District Secretary

(name) (address) (club)

(email) (contact phone)

District Treasurer

(name) (address) (club)

(email) (contact phone)

Lt. Governor

(name) (address) (club)

(email) (contact phone)

Lt. Governor

(name)	(address)	(club)
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(email)	(contact phone)
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Lt. Governor

(name)	(address)	(club)
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(email)	(contact phone)
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Lt. Governor

(name)	(address)	(club)
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(email)	(contact phone)
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Lt. Governor

(name)	(address)	(club)
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(email)	(contact phone)
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Lt. Governor

(name)	(address)	(club)
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(email)	(contact phone)
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Anchor Coordinator

(name)	(address)	(club)
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(email)	(contact phone)
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**PLEASE COMPLETE:
DISTRICT FALL COUNCIL**

DATE: _____

FACILITY/LOCATION: _____

DISTRICT CONVENTION

DATE: _____

FACILITY/LOCATION: _____