

# FORM 11- CHAPTER OFFICERS

This report is to be filed with the Executive Officer of Illinois within 10 days of election of officers.

Form may be completed online at <http://members.ildemolay.org> under E-Forms

\_\_\_\_\_ Chapter; Chapter # 14 \_\_\_\_\_

Located in \_\_\_\_\_, Illinois  
City

**Term Start Date:** \_\_\_\_/\_\_\_\_/\_\_\_\_

**Term End Date:** \_\_\_\_/\_\_\_\_/\_\_\_\_

**Installation Date:** \_\_\_\_/\_\_\_\_/\_\_\_\_

**Installation Time:** \_\_\_\_\_

**Installation Location:** \_\_\_\_\_

**Report Councilors, Scribe, Sweetheart and Court President.  
 If no one will be holding the office, write VACANT as Full Name.**

## CHAPTER ELECTED OFFICERS (Type or print neatly in black ink)

<b>MASTER COUNCILOR</b>	Name (First & Last) _____ Mailing Address _____ City _____ State _____ ZIP CODE _____	Phone Number _____ Cell Phone Number _____ Email Address _____
<b>SENIOR COUNCILOR</b>	(First & Last) _____ Mailing Address _____ City _____ State _____ ZIP CODE _____	Phone Number _____ Cell Phone Number _____ Email Address _____
<b>JUNIOR COUNCILOR</b>	Name (First & Last) _____ Mailing Address _____ City _____ State _____ ZIP CODE _____	Phone Number _____ Cell Phone Number _____ Email Address _____

## Other Officers/Sweethearts (Type or print neatly in black ink)

<b>SCRIBE</b>	Name (First & Last) _____ Mailing Address _____ City _____ State _____ ZIP CODE _____	Phone Number _____ Cell Phone Number _____ Email Address _____
<b>CHAPTER SWEETHEART</b>	Name (First & Last) _____ Mailing Address _____ City _____ State _____ ZIP CODE _____	Phone Number _____ Cell Phone Number _____ Email Address _____
<b>SWEETHEART COURT PRESIDENT</b>	Name (First & Last) _____ Mailing Address _____ City _____ State _____ ZIP CODE _____	Phone Number _____ Cell Phone Number _____ Email Address _____

**Mail this form to Illinois DeMolay Office or Scan/Email to EO@ILDeMolay.org**