

HUERFANO CHAPTER HOUSE
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REQUEST FORM TO BE PUT ON THE PLANNING OR REGULAR CHAPTER MEETING AGENDA

*****Please attach copies of the Original Draft Resolution*****

ABSOLUTELY NO PERSONNEL ISSUES

Date Received: _____ **[Office Only]**

Please mark one: Report Resolution Announcement Assistance Presentation

Name: _____

Telephone Number: () _____ Date of Request: _____

Address: _____

Name of Department or Company (If Applicable): _____

Brief Description of the Request, Report, Resolution, Announcement or Presentation: _____

Request form and supporting documents must be submitted to the Chapter Administration five (5) days prior to a Chapter Planning Meeting. Chapter Planning Meeting will be held the first Sunday of each month and the Regular Chapter Meeting the second Sunday of each month. Your cooperation will be greatly appreciated. If you have any questions, please contact the Chapter Community Service Coordinator or Account Maintenance Specialist. Thank You

SUBMIT RESOLUTION TO:

Name of Individual or Department: _____

Address: _____

Telephone Number: () _____

Revised: 02-12-18

Incomplete request forms will not be accepted