WING ANNUAL REPORT – PART 2

Complete and mail this form **no later than 01 July** annually. Mail all three copies to your Regional Vice-President. Regional VPs will mail two copies to the Group Pres. and Group Pres. will mail one copy to Nat'l HQ. (NOTE: If your Group does not have Regional Vice-Presidents, mail two copies direct to the Group President for further action and distribution) **PLEASE PRINT CLEARLY**

GROUP & NHQ Use	

RECORD OF WING EXECUTIVE OFFICE HOLDERS AND DIRECTORY INFORMATION		
This report is filed at this time as an Annual Report:		
an interim Change.		
and this updated information is submitted to become effective20 (for interim changes, provide only the sections affected by the changed information)		
Date Submitted20 Wing Wing Name		
Wing Mailing Address (Street or PO Box No.)		
City/Town Prov/State Postal Code		
NB: If the Wing Quarters address differs from the mailing address, please enter Quarters Address here:		
The Wing General Meeting takes place monthly: Week Day		
IF THE WING OPERATES QUARTERS Please complete this section:		
Wing # The Wing operates a bar: Yes No		
Quarters Phone Number: ()		
Wing E-mail address:Wing web-site		
The Wing Sponsors an Air Cadet Squadron: YES NO Squadron Number:		
The Wing has an active Ladies Auxiliary: YES NO		

WHY WE NEED THIS INFORMATION AT GROUP AND NATIONAL HQs....

- We use it to update the Wing Directory routinely published in Airforce magazine.
- We use the info to update the names, addresses and phone numbers of more than 500 volunteer office-holders listed in Booklet 107 (National, Group and Wing Executives) or on our web-site
- We use it to answer queries from newly recruited Members-at-Large who express interest in joining a nearby Wing.
- We use it to keep in touch with you, and your Wing!

Our Annual Wing Elections took place on _	and the Regular	
Members elected to Executive Office are listed below: (PLEASE PRINT CLEARLY)		
WING PRESIDENT	WING SECRETARY	
Name:	Name:	
Street:	Street:	
City/Town:		
Prov/State: Postal Code:	Prov/State: Postal Code:	
Phones: Home: ()	Phones: Home: (
Work: ()	Work: ()	
Fax: ()		
E-mail:	E-mail:	
WING TREASURER	WING MEMBERSHIP CHAIR	
Name:	Name:	
Street:		
City/Town:		
Prov/State: Postal Code:	Prov/State: Postal Code:	
Phones: Home: ()	Phones: Home: ()	
Work: ()	Work: ()	
Fax: ()		
E-mail:	E-mail:	
WING PUBLIC RELATIONS	WING VICE-PRESIDENT	
Name:	Name:	
Street:		
City/Town:		
Prov/State: Postal Code:	Prov/State: Postal Code:	