

## SECTION OFFICERS & COUNCIL INFORMATION

*In order to maintain current membership lists, database records, web postings, and publications notifications, please complete this form and return promptly to:*

*Heather Anderson: [banderson@mail.michbar.org](mailto:banderson@mail.michbar.org) 306 Townsend Street, Lansing, MI 48933 fax:517-372-0401*

**You must include the P# for each election to ensure accuracy of records!**

**NAME OF SECTION:** \_\_\_\_\_

**DATE OF SECTION ANNUAL MEETING:** \_\_\_\_\_

### NEW OFFICERS:

TITLE: \_\_\_\_\_ P#: \_\_\_\_\_ NAME: \_\_\_\_\_

TITLE: \_\_\_\_\_ P#: \_\_\_\_\_ NAME: \_\_\_\_\_

TITLE: \_\_\_\_\_ P#: \_\_\_\_\_ NAME: \_\_\_\_\_

TITLE: \_\_\_\_\_ P#: \_\_\_\_\_ NAME: \_\_\_\_\_

TITLE: \_\_\_\_\_ P#: \_\_\_\_\_ NAME: \_\_\_\_\_

### NEW COUNCIL MEMBERS/RE-ELECTED COUNCIL MEMBERS:

TERM: \_\_\_\_\_ P#: \_\_\_\_\_ NAME: \_\_\_\_\_

TERM: \_\_\_\_\_ P#: \_\_\_\_\_ NAME: \_\_\_\_\_

TERM: \_\_\_\_\_ P#: \_\_\_\_\_ NAME: \_\_\_\_\_

TERM: \_\_\_\_\_ P#: \_\_\_\_\_ NAME: \_\_\_\_\_

TERM: \_\_\_\_\_ P#: \_\_\_\_\_ NAME: \_\_\_\_\_

TERM: \_\_\_\_\_ P#: \_\_\_\_\_ NAME: \_\_\_\_\_

### COUNCIL MEMBERS NOT RETURNING:

NAME: \_\_\_\_\_ NAME: \_\_\_\_\_

NAME: \_\_\_\_\_ NAME: \_\_\_\_\_

NAME: \_\_\_\_\_ NAME: \_\_\_\_\_

### OTHER COUNCIL POSITIONS:

TITLE/TERM: \_\_\_\_\_ P#: \_\_\_\_\_ NAME: \_\_\_\_\_

TITLE/TERM: \_\_\_\_\_ P#: \_\_\_\_\_ NAME: \_\_\_\_\_

TITLE/TERM: \_\_\_\_\_ P#: \_\_\_\_\_ NAME: \_\_\_\_\_

TITLE/TERM: \_\_\_\_\_ P#: \_\_\_\_\_ NAME: \_\_\_\_\_

TITLE/TERM: \_\_\_\_\_ P#: \_\_\_\_\_ NAME: \_\_\_\_\_

TITLE/TERM: \_\_\_\_\_ P#: \_\_\_\_\_ NAME: \_\_\_\_\_

**Note:** If your Annual Meeting is held in conjunction with the Bar's Annual Meeting, please complete and turn this form in at the State Bar of Michigan office at the conference center. Thank you for your cooperation in this matter.