

Society Change of Officer Information

LWML RMD ZONE: _____

DATE OF THIS REPORT: _____

Society Name _____ **Number in Society** _____

Month of Election _____ Monthly Meeting Day _____

CHURCH: _____ EMAIL _____

ADDRESS _____ ADDRESS 2 _____

CITY _____ STATE _____ ZIP _____ PHONE _____

PASTOR: _____

TIDINGS CONTACT: _____ EMAIL _____

ADDRESS _____ ADDRESS 2 _____

CITY _____ STATE _____ ZIP _____ PHONE _____

PRESIDENT: _____ EMAIL _____

ADDRESS _____ ADDRESS 2 _____

CITY _____ STATE _____ ZIP _____ PHONE _____

VICE PRESIDENT: _____ EMAIL _____

ADDRESS _____ ADDRESS 2 _____

CITY _____ STATE _____ ZIP _____ PHONE _____

SECRETARY: _____ EMAIL _____

ADDRESS _____ ADDRESS 2 _____

CITY _____ STATE _____ ZIP _____ PHONE _____

TREASURER: _____ EMAIL _____

ADDRESS _____ ADDRESS 2 _____

CITY _____ STATE _____ ZIP _____ PHONE _____

Send a completed form to your zone president and a completed form to the LWML RMD publications manager:

The *Tidings* contact person will receive online notification of *Tidings* issues.

The issues of the *Lutheran Woman's Quarterly* are typically mailed to your church address.

Beth Shroff
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Albuquerque, NM 87111
tidingsbusmgr@lwmlrmd.org



Rocky Mountain
District

Thank you for completing this report immediately following your election of officers and helping us keep our records up to date.