

United Methodist Women Greater Detroit District
2019 LOCAL ELECTED LEADERSHIP

Please Print or Type _____ # UMW Members _____

Name of Local Unit _____ City _____

Church Address _____ Zip Code _____

Phone # _____ Email Address _____

Please complete and send this form **every year**. List name, mailing address, phone number(s) and email address for each member listed. Print 'None' on the line if no one in a position. Add names and information for people who share a position or have other important positions at the bottom or on the back. Email addresses are important as sending newsletters by email will save money. Contact information is used by the district and conference officers to contact local officers and to mail or email newsletters. The newsletters, flyers, forms and other information can be obtained also from the district/ conference web site:
www.umwmichiganconference.org/gdd.html.

Send completed form to:
Greater Detroit District Communications Coordinator
Kristine Miranne, 16650 Chandler Dr., Detroit MI 48224
or by email to
kristine.miranne@att.net

President _____ Phone # _____

Address _____ City _____ Zip _____

Cell Phone # _____ Email Address _____

Vice President _____ Phone # _____

Address _____ City _____ Zip _____

Cell Phone # _____ Email Address _____

Secretary _____ Phone # _____

Address _____ City _____ Zip _____

Cell Phone # _____ Email Address _____

Treasurer _____ Phone # _____

Address _____ City _____ Zip _____

Cell Phone # _____ Email Address _____

CO-OFFICER or Other _____ Phone # _____

Address _____ City _____ Zip _____

Cell Phone # _____ Email Address _____

Co-officer or Other _____ Phone # _____

Address _____ City _____ Zip _____

Cell Phone # _____ Email Address _____

MISSION COORDINATORS

Spiritual Growth _____ Phone # _____

Address _____ City _____ Zip _____

Cell Phone # _____ Email Address _____

Membership Nurture & Outreach _____ Phone # _____

Address _____ City _____ Zip _____

Cell Phone # _____ Email Address _____

Social Action _____ Phone # _____

Address _____ City _____ Zip _____

Cell Phone # _____ Email Address _____

Education and Interpretation _____ Phone # _____

Address _____ City _____ Zip _____

Cell Phone # _____ Email Address _____

Secretary of Program Resources _____ Phone # _____

Address _____ City _____ Zip _____

Cell Phone # _____ Email Address _____

Communications Coordinator _____ Phone # _____

Address _____ City _____ Zip _____

Cell Phone # _____ Email Address _____

Nominations Chairperson _____ Phone # _____

Address _____ City _____ Zip _____

Cell Phone # _____ Email Address _____

Co-MC or Other Position _____ Phone # _____

Address _____ City _____ Zip _____

Cell Phone # _____ Email Address _____

Co-MC or Other Position _____ Phone # _____

Address _____ City _____ Zip _____

Cell Phone # _____ Email Address _____

Co-MC or Other Position _____ Phone # _____

Address _____ City _____ Zip _____

Cell Phone # _____ Email Address _____

If there are other leaders who should receive mailings list their position, name and information on another sheet.