



VVA STATE COUNCIL ELECTION REPORT

Complete and forward this form (or a facsimile) to:
Vietnam Veterans of America, ATTN: Membership Affairs
8605 Cameron St., Suite 400, Silver Spring, MD 20910
Telephone (301)585-4000, Fax (301)585-0519

Election for 20____ - 20 ____ (year)

State: _____

State Council Phone: _____ State Council Fax: _____

State Council Email: _____

State Council Web Site: _____

Primary State Council Contact

Secondary State Council Contact

Name: _____ Name: _____

Title: _____ Title: _____

Phone: _____ Phone: _____

State Council Address _____

City _____ State _____ Zip _____

Note: This is the state council's mailing address for official correspondence, The VVA Veteran, dues rebates, and household goods program distributions.

State Council contact information authorized for public viewing on the VVA Chapter Locator web page

Phone: _____

Email: _____

Note: This information is optional, but highly encouraged to enable potential members to contact your state council.

Membership Contact

Name: _____

VVA Membership No. _____

Phone: _____

Address: _____

City _____ State _____ Zip _____

Note: Fill in this address only if you want the membership rosters sent directly to the membership contact. Otherwise, they will be mailed to the state council address above.

