State Society_____ **Headquarters** ☐ **Chapter** ☐_____

1. Officers Elected: – Continued

TITLE	NAME	ADDRESS	CITY	STATE	ZIP CODE	TELEPHONE

2. Managers Elected:

For 1 Year	For 2 Years	For 3 Years

Signed_____**Title**_____**Date**_____

One copy of this report should be mailed to GSSR Headquarters at
412 West Francis St. Williamsburg, VA 23185