

ANCIENT ORDER OF HIBERNIANS

IN AMERICA

Regular Election

Fill Vacancy



The following have been elected or appointed to _____ Division _____ State _____ County office. Their/his term will begin: _____
Insert date or the word "immediately"

(Type or print all names and addresses. Mail copy to each Superior Board.)

Title	First Name	Last Name	Address	City	State	Zip Code	Phone #	E-Mail
PRESIDENT								
VICE PRESIDENT								
RECORDING SECRETARY								
FINANCIAL SECRETARY								
TREASURER								
CHMN. STANDING COMM.								
MARSHAL								
SENTINEL								
CHAPLAIN								
HISTORIAN								
ORGANIZER								
CHARITIES & MISSIONS, CHAIRMAN								
CATHOLIC ACTION, CHAIRMAN								
F.F.A.I., CHAIRMAN								
PRO-LIFE, CHAIRMAN								
P.E.C., CHAIRMAN								
IMMIGRATION, CHAIRMAN								
VETERANS AFFAIRS								
WEBMASTER								
HIBERNIAN HUNGER PROJECT								
PROJECT ST. PATRICK								
JR. PAST PRESIDENT								

_____ Division #: _____ County Board _____ State Board

The above officers were elected or appointed to the office designated on: _____
 _____ Date

_____ President's Name / Signature _____ Secretary's Name /Signature

MAIL TO:
 AOH/NYS Secretary Thomas M. O'Donnell, 3067 Lewiston Road Niagara Falls, NY 14305