

Chesapeake Officer Filing Form

First Name: _____

Last Name: _____

Email Address: _____

Cell Phone Number: _____

Address: _____

City: _____

Zip: _____ Congressional District: _____

Officer Position Sought: (Circle One)

Chair/ 1st Vice Chair/ 2nd Vice Chair/ 3rd Vice Chair/ Treasurer/ Secretary/ Financial Secretary

Sargent-At-Arms

Signature: _____

Date: _____

***Completed applications must be given to Dr. Winston Odom via email drwoo1998@aol.com, or by hand 1002 Rabbit Run, Chesapeake 23320**