



**IAMAW  
DISTRICT  
142**

## 2025 LOCAL OFFICER INFORMATION

**LOCAL #:** \_\_\_\_\_

**DISTRICT AFFILIATION:** \_\_\_\_\_ **GVP:** \_\_\_\_\_ **AUDITOR:** \_\_\_\_\_

**LOCAL OFFICE ADDRESS:** \_\_\_\_\_

(YES \_\_\_\_\_ NO \_\_\_\_\_ Check NO if there is not a Local office. Indicate address where Local mail is to be sent.)

**LOCAL PHONE #:** \_\_\_\_\_ **EMAIL:** \_\_\_\_\_

**LOCAL MEETING PLACE:** \_\_\_\_\_

**DAY(S)/DATE(S)/TIME(S):** \_\_\_\_\_

*The following information is needed for the purpose of keeping you informed of important events that may affect your Local. This information is kept confidential. Please complete all information fields with non-Company contact information.*

**PRESIDENT:** \_\_\_\_\_

**AIRLINE & STATION or RETIRED:** \_\_\_\_\_

**ADDRESS FOR MAIL DELIVERY:** \_\_\_\_\_

(Circle – Local or Residence)

**PERSONAL EMAIL:** \_\_\_\_\_ **PERSONAL PHONE:** \_\_\_\_\_

**VICE-PRESIDENT:** \_\_\_\_\_

**AIRLINE & STATION or RETIRED:** \_\_\_\_\_

**ADDRESS FOR MAIL DELIVERY:** \_\_\_\_\_

(Circle – Local or Residence)

**PERSONAL EMAIL:** \_\_\_\_\_ **PERSONAL PHONE:** \_\_\_\_\_

**RECORDING SECRETARY:** \_\_\_\_\_

**AIRLINE & STATION or RETIRED:** \_\_\_\_\_

**ADDRESS FOR MAIL DELIVERY:** \_\_\_\_\_

(Circle – Local or Residence)

**PERSONAL EMAIL:** \_\_\_\_\_ **PERSONAL PHONE:** \_\_\_\_\_

**SECRETARY-TREASURER:** \_\_\_\_\_

**AIRLINE & STATION or RETIRED:** \_\_\_\_\_

**ADDRESS FOR MAIL DELIVERY:** \_\_\_\_\_

(Circle – Local or Residence)

**PERSONAL EMAIL:** \_\_\_\_\_ **PERSONAL PHONE:** \_\_\_\_\_



**2025 LOCAL OFFICER INFORMATION – CONTINUED**

<b>CONDUCTOR/SENTINEL:</b>  EMAIL:  PHONE #:	<b>TRUSTEE:</b>  EMAIL:  PHONE #:
<b>COMMUNICATOR:</b>  EMAIL:  PHONE #:	<b>TRUSTEE:</b>  EMAIL:  PHONE #:
<b>EDUCATOR:</b>  EMAIL:  PHONE #:	<b>TRUSTEE:</b>  EMAIL:  PHONE #:

**COMPLETE AND RETURN BOTH PAGES OF THIS FORM TO:**  
**AIR TRANSPORT DISTRICT 142**  
**ATTN: JOE SHULTZ, SECRETARY-TREASURER**  
**9633 S 48th St Ste 100**  
**Phoenix, AZ 85044**

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I CERTIFY THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF, AND FROM INFORMATION FURNISHED TO ME BY THE ABOVE ELECTED OFFICERS THAT THEY ARE QUALIFIED UNDER SECTION 504, PUBLIC LAW 86-257, SEPTEMBER 14, 1959, TO HOLD OFFICE IN ACCORDANCE WITH THE ACT, LAWS AND POLICIES OF THE IAM.

RECORDING SECRETARY PRINTED NAME: \_\_\_\_\_

RECORDING SECRETARY SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

LOCAL SEAL