

Required Information for Directors & Officers Liability Coverage: (If office is vacant, please write vacant in the appropriate areas)

President:

FIRST	MI	LAST
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STREET	CITY	ZIP
<hr/>		
AREA CODE	PHONE NUMBER	
<hr/>		
EMAIL ADDRESS		

1st Vice President:

FIRST	MI	LAST
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STREET	CITY	ZIP
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AREA CODE	PHONE NUMBER	
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EMAIL ADDRESS		

2nd Vice President:

FIRST	MI	LAST
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STREET	CITY	ZIP
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AREA CODE	PHONE NUMBER	
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EMAIL ADDRESS		

Secretary:

FIRST	MI	LAST
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STREET	CITY	ZIP
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AREA CODE	PHONE NUMBER	
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EMAIL ADDRESS		

Treasurer:

FIRST	MI	LAST
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STREET	CITY	ZIP
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AREA CODE	PHONE NUMBER	
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EMAIL ADDRESS		

(Please use additional sheet if needed for additional officers.)

