

<b>CSHA REGION OFFICERS ROSTER- 20____</b>				
<b>OFFICER</b>	<b>NAME</b>	<b>ADDRESS / CITY / ZIP</b>	<b>AREA CODE/PHONE</b>	<b>EMAIL ADDRESS</b>
PRESIDENT:				
IMMED. PAST PRESIDENT:				
FIRST VICE PRESIDENT:				
SECOND VICE PRESIDENT:				
SECRETARY:				
TREASURER:				
<b>It is imperative that this roster is turned into the State Office as soon as Officers have been elected/appointed</b>				
<b>Email or fax are preferred</b>				
To EMAIL: californiastatehorsemen@gmail.com or FAX 888-389-0359 or CSHA 1330 W.Robinhood Dr. Suite D Stockton, CA 95207				
<b>You will need to submit the Chairs on a separate form (the Region <u>Chair</u> Roster form)</b>				
<b>to the State Office as soon as the Chairs are appointed</b>				
If you have any questions, please call (209) 227-7110				