



LIST OF OFFICERS – 2025

PLEASE TYPE OR PRINT ALL INFORMATION NEATLY
RETURN COMPLETED FORMS TO THE R.O.E.A. CHANCERY NO LATER THAN March 31, 2025

PARISH/MISSION (Name) _____

MAILING ADDRESS _____

CITY _____ **STATE/PROV** _____ **ZIP/POSTAL CODE** _____

PHONE () _____ **FAX ()** _____ **WEBSITE** _____

CHURCH LOCATION (IF DIFFERENT FROM ABOVE)

ADDRESS _____

CITY _____ **STATE/PROV** _____ **ZIP/POSTAL CODE** _____

PRIEST _____ | **EMAIL** _____

MAILING ADDRESS _____ | **PHONE ()** _____

CITY _____ **STATE/PROV** _____ **ZIP/POSTAL CODE** _____

ASSISTANT PRIEST _____ | **EMAIL** _____

MAILING ADDRESS _____ | **PHONE ()** _____

CITY _____ **STATE/PROV** _____ **ZIP/POSTAL CODE** _____

PARISH COUNCIL

PRESIDENT _____ | **EMAIL** _____

MAILING ADDRESS _____ | **PHONE ()** _____

CITY _____ **STATE/PROV** _____ **ZIP/POSTAL CODE** _____

VICE PRESIDENT _____ | **EMAIL** _____

MAILING ADDRESS _____ | **PHONE ()** _____

CITY _____ **STATE/PROV** _____ **ZIP/POSTAL CODE** _____

SECRETARY _____ | EMAIL _____
MAILING ADDRESS _____ | PHONE () _____
CITY _____ STATE/PROV _____ | ZIP/POSTAL CODE _____

TREASURER _____ | EMAIL _____
MAILING ADDRESS _____ | PHONE () _____
CITY _____ STATE/PROV _____ | ZIP/POSTAL CODE _____

AUDITOR 1 _____ | EMAIL _____
MAILING ADDRESS _____ | PHONE () _____
CITY _____ STATE/PROV _____ | ZIP/POSTAL CODE _____

AUDITOR 2 _____ | EMAIL _____
MAILING ADDRESS _____ | PHONE () _____
CITY _____ STATE/PROV _____ | ZIP/POSTAL CODE _____

TRUSTEE/EPITROP _____ | EMAIL _____
MAILING ADDRESS _____ | PHONE () _____
CITY _____ STATE/PROV _____ | ZIP/POSTAL CODE _____

TRUSTEE/EPITROP _____ | EMAIL _____
MAILING ADDRESS _____ | PHONE () _____
CITY _____ STATE/PROV _____ | ZIP/POSTAL CODE _____

9 - MEMBER _____ | EMAIL _____
MAILING ADDRESS _____ | PHONE () _____
CITY _____ STATE/PROV _____ | ZIP/POSTAL CODE _____

10 - MEMBER _____ | EMAIL _____
MAILING ADDRESS _____ | PHONE () _____
CITY _____ STATE/PROV _____ | ZIP/POSTAL CODE _____

11 - MEMBER _____ | EMAIL _____
MAILING ADDRESS _____ | PHONE () _____
CITY _____ STATE/PROV _____ ZIP/POSTAL CODE _____

12 - MEMBER _____ | EMAIL _____
MAILING ADDRESS _____ | PHONE () _____
CITY _____ STATE/PROV _____ ZIP/POSTAL CODE _____

13 - MEMBER _____ | EMAIL _____
MAILING ADDRESS _____ | PHONE () _____
CITY _____ STATE/PROV _____ ZIP/POSTAL CODE _____

14 - MEMBER _____ | EMAIL _____
MAILING ADDRESS _____ | PHONE () _____
CITY _____ STATE/PROV _____ ZIP/POSTAL CODE _____

15 - MEMBER _____ | EMAIL _____
MAILING ADDRESS _____ | PHONE () _____
CITY _____ STATE/PROV _____ ZIP/POSTAL CODE _____

16 - MEMBER _____ | EMAIL _____
MAILING ADDRESS _____ | PHONE () _____
CITY _____ STATE/PROV _____ ZIP/POSTAL CODE _____

17 - MEMBER _____ | EMAIL _____
MAILING ADDRESS _____ | PHONE () _____
CITY _____ STATE/PROV _____ ZIP/POSTAL CODE _____

18 - MEMBER _____ | EMAIL _____
MAILING ADDRESS _____ | PHONE () _____
CITY _____ STATE/PROV _____ ZIP/POSTAL CODE _____

19 - MEMBER _____ | EMAIL _____
MAILING ADDRESS _____ | PHONE () _____
CITY _____ STATE/PROV _____ ZIP/POSTAL CODE _____

20 - MEMBER _____ | EMAIL _____
MAILING ADDRESS _____ | PHONE () _____
CITY _____ STATE/PROV _____ ZIP/POSTAL CODE _____

21 - MEMBER _____ | EMAIL _____
MAILING ADDRESS _____ | PHONE () _____
CITY _____ STATE/PROV _____ ZIP/POSTAL CODE _____

22 - MEMBER _____ | EMAIL _____
MAILING ADDRESS _____ | PHONE () _____
CITY _____ STATE/PROV _____ ZIP/POSTAL CODE _____

23 - MEMBER _____ | EMAIL _____
MAILING ADDRESS _____ | PHONE () _____
CITY _____ STATE/PROV _____ ZIP/POSTAL CODE _____

24 - MEMBER _____ | EMAIL _____
MAILING ADDRESS _____ | PHONE () _____
CITY _____ STATE/PROV _____ ZIP/POSTAL CODE _____

25 - MEMBER _____ | EMAIL _____
MAILING ADDRESS _____ | PHONE () _____
CITY _____ STATE/PROV _____ ZIP/POSTAL CODE _____

26 - MEMBER _____ | EMAIL _____
MAILING ADDRESS _____ | PHONE () _____
CITY _____ STATE/PROV _____ ZIP/POSTAL CODE _____

27 - MEMBER _____ | EMAIL _____
MAILING ADDRESS _____ | PHONE () _____
CITY _____ STATE/PROV _____ ZIP/POSTAL CODE _____

28 - MEMBER _____ | EMAIL _____
MAILING ADDRESS _____ | PHONE () _____
CITY _____ STATE/PROV _____ ZIP/POSTAL CODE _____

29 - MEMBER _____ | EMAIL _____
MAILING ADDRESS _____ | PHONE () _____
CITY _____ STATE/PROV _____ ZIP/POSTAL CODE _____

30 - MEMBER _____ | EMAIL _____
MAILING ADDRESS _____ | PHONE () _____
CITY _____ STATE/PROV _____ ZIP/POSTAL CODE _____

DATE OF ELECTION OF ABOVE OFFICERS _____
DAY / MONTH / YEAR

NAME OF PERSON COMPLETING THIS DOCUMENT _____

POSTITION IN THE PARISH _____

SIGNATURE _____

NAME OF PARISH PRIEST _____

SIGNATURE OF PARISH PRIEST _____

DATE OF COMPLETION AND MAILING _____
DAY / MONTH / YEAR

PARISH SEAL —

LADIES AUXILIARY

PATRON SAINT / NAME _____ NUMBER OF MEMBERS _____

FOUNDED IN YEAR _____ DATE OF ELECTION OF OFFICERS _____
DAY / MONTH / YEAR

PRESIDENT _____ | EMAIL _____
MAILING ADDRESS _____ | PHONE () _____
CITY _____ STATE/PROV _____ ZIP/POSTAL CODE _____

VICE PRESIDENT _____ | EMAIL _____
MAILING ADDRESS _____ | PHONE () _____
CITY _____ STATE/PROV _____ ZIP/POSTAL CODE _____

SECRETARY _____ | EMAIL _____
MAILING ADDRESS _____ | PHONE () _____
CITY _____ STATE/PROV _____ ZIP/POSTAL CODE _____

TREASURER _____ | EMAIL _____
MAILING ADDRESS _____ | PHONE () _____
CITY _____ STATE/PROV _____ ZIP/POSTAL CODE _____

AUDITOR 1 _____ | EMAIL _____
MAILING ADDRESS _____ | PHONE () _____
CITY _____ STATE/PROV _____ ZIP/POSTAL CODE _____

AUDITOR 2 _____ | EMAIL _____
MAILING ADDRESS _____ | PHONE () _____
CITY _____ STATE/PROV _____ ZIP/POSTAL CODE _____

A. R. O. Y. CHAPTER

PATRON SAINT / NAME _____ NUMBER OF MEMBERS _____

FOUNDED IN YEAR _____ DATE OF ELECTION OF OFFICERS _____
DAY / MONTH / YEAR

PRESIDENT _____ EMAIL _____
MAILING ADDRESS _____ PHONE () _____
CITY _____ STATE/PROV _____ ZIP/POSTAL CODE _____

VICE PRESIDENT _____ EMAIL _____
MAILING ADDRESS _____ PHONE () _____
CITY _____ STATE/PROV _____ ZIP/POSTAL CODE _____

SECRETARY _____ EMAIL _____
MAILING ADDRESS _____ PHONE () _____
CITY _____ STATE/PROV _____ ZIP/POSTAL CODE _____

TREASURER _____ EMAIL _____
MAILING ADDRESS _____ PHONE () _____
CITY _____ STATE/PROV _____ ZIP/POSTAL CODE _____

AUDITOR 1 _____ EMAIL _____
MAILING ADDRESS _____ PHONE () _____
CITY _____ STATE/PROV _____ ZIP/POSTAL CODE _____

AUDITOR 2 _____ EMAIL _____
MAILING ADDRESS _____ PHONE () _____
CITY _____ STATE/PROV _____ ZIP/POSTAL CODE _____

ADVISOR 1 _____ EMAIL _____
MAILING ADDRESS _____ PHONE () _____
CITY _____ STATE/PROV _____ ZIP/POSTAL CODE _____

LITURGICAL ASSISTANTS

___ DEACON ___ SUBDEACON ___ READER

NAME _____ | **EMAIL** _____
MAILING ADDRESS _____ | **PHONE** () _____
CITY _____ **STATE/PROV** _____ **ZIP/POSTAL CODE** _____

___ DEACON ___ SUBDEACON ___ READER

NAME _____ | **EMAIL** _____
MAILING ADDRESS _____ | **PHONE** () _____
CITY _____ **STATE/PROV** _____ **ZIP/POSTAL CODE** _____

___ DEACON ___ SUBDEACON ___ READER

NAME _____ | **EMAIL** _____
MAILING ADDRESS _____ | **PHONE** () _____
CITY _____ **STATE/PROV** _____ **ZIP/POSTAL CODE** _____

___ DEACON ___ SUBDEACON ___ READER

NAME _____ | **EMAIL** _____
MAILING ADDRESS _____ | **PHONE** () _____
CITY _____ **STATE/PROV** _____ **ZIP/POSTAL CODE** _____

CANTORS

NAME _____ | **EMAIL** _____
MAILING ADDRESS _____ | **PHONE** () _____
CITY _____ **STATE/PROV** _____ **ZIP/POSTAL CODE** _____

NAME _____ | **EMAIL** _____
MAILING ADDRESS _____ | **PHONE** () _____
CITY _____ **STATE/PROV** _____ **ZIP/POSTAL CODE** _____

PLEASE LIST ANY ADDITIONAL CANTORS/ASSISTANTS ON THE BACK OF THIS PAGE

CHOIR

PATRON SAINT / NAME _____ NUMBER OF MEMBERS _____

FOUNDED IN YEAR _____ DATE OF ELECTION OF OFFICERS _____
DAY / MONTH / YEAR

DIRECTOR _____ EMAIL _____
MAILING ADDRESS _____ PHONE () _____
CITY _____ STATE/PROV _____ ZIP/POSTAL CODE _____

ASSISTANT DIRECTOR _____ EMAIL _____
MAILING ADDRESS _____ PHONE () _____
CITY _____ STATE/PROV _____ ZIP/POSTAL CODE _____

PRESIDENT _____ EMAIL _____
MAILING ADDRESS _____ PHONE () _____
CITY _____ STATE/PROV _____ ZIP/POSTAL CODE _____

VICE PRESIDENT _____ EMAIL _____
MAILING ADDRESS _____ PHONE () _____
CITY _____ STATE/PROV _____ ZIP/POSTAL CODE _____

SECRETARY _____ EMAIL _____
MAILING ADDRESS _____ PHONE () _____
CITY _____ STATE/PROV _____ ZIP/POSTAL CODE _____

TREASURER _____ EMAIL _____
MAILING ADDRESS _____ PHONE () _____
CITY _____ STATE/PROV _____ ZIP/POSTAL CODE _____

CATECHETICAL / CHURCH SCHOOL

NUMBER OF STUDENTS _____ BUDGET FOR PROGRAM \$ _____ MONTHS IN SESSION _____

DAY & TIME OF LESSONS _____ GRADE LEVELS OFFERED _____

DIRECTOR _____ | EMAIL _____
MAILING ADDRESS _____ | PHONE () _____
CITY _____ STATE/PROV _____ ZIP/POSTAL CODE _____

ASSISTANT DIRECTOR _____ | EMAIL _____
MAILING ADDRESS _____ | PHONE () _____
CITY _____ STATE/PROV _____ ZIP/POSTAL CODE _____

TEACHER _____ | EMAIL _____
MAILING ADDRESS _____ | PHONE () _____
CITY _____ STATE/PROV _____ ZIP/POSTAL CODE _____

TEACHER _____ | EMAIL _____
MAILING ADDRESS _____ | PHONE () _____
CITY _____ STATE/PROV _____ ZIP/POSTAL CODE _____

TEACHER _____ | EMAIL _____
MAILING ADDRESS _____ | PHONE () _____
CITY _____ STATE/PROV _____ ZIP/POSTAL CODE _____

TEACHER _____ | EMAIL _____
MAILING ADDRESS _____ | PHONE () _____
CITY _____ STATE/PROV _____ ZIP/POSTAL CODE _____

TEACHER _____ | EMAIL _____
MAILING ADDRESS _____ | PHONE () _____
CITY _____ STATE/PROV _____ ZIP/POSTAL CODE _____

PLEASE LIST ANY ADDITIONAL TEACHERS ON THE BACK OF THIS PAGE

PARENTS ASSOCIATION / MOTHERS CLUB

NAME OF ORGANIZATION _____ NUMBER OF MEMBERS _____

FOUNDED IN YEAR _____ DATE OF ELECTION OF OFFICERS _____
DAY / MONTH / YEAR

PRESIDENT _____ EMAIL _____
MAILING ADDRESS _____ PHONE () _____
CITY _____ STATE/PROV _____ ZIP/POSTAL CODE _____

VICE PRESIDENT _____ EMAIL _____
MAILING ADDRESS _____ PHONE () _____
CITY _____ STATE/PROV _____ ZIP/POSTAL CODE _____

SECRETARY _____ EMAIL _____
MAILING ADDRESS _____ PHONE () _____
CITY _____ STATE/PROV _____ ZIP/POSTAL CODE _____

TREASURER _____ EMAIL _____
MAILING ADDRESS _____ PHONE () _____
CITY _____ STATE/PROV _____ ZIP/POSTAL CODE _____

AUDITOR 1 _____ EMAIL _____
MAILING ADDRESS _____ PHONE () _____
CITY _____ STATE/PROV _____ ZIP/POSTAL CODE _____

AUDITOR 2 _____ EMAIL _____
MAILING ADDRESS _____ PHONE () _____
CITY _____ STATE/PROV _____ ZIP/POSTAL CODE _____

SENIOR CITIZENS ASSOCIATION

PATRON SAINT / NAME _____ NUMBER OF MEMBERS _____

☘ PARISH AUXILIARY _ OTHER ORGANIZATIONAL _____

FOUNDED IN YEAR _____ DATE OF ELECTION OF OFFICERS _____
DAY / MONTH / YEAR

PRESIDENT _____ EMAIL _____
MAILING ADDRESS _____ PHONE () _____
CITY _____ STATE/PROV _____ ZIP/POSTAL CODE _____

VICE PRESIDENT _____ EMAIL _____
MAILING ADDRESS _____ PHONE () _____
CITY _____ STATE/PROV _____ ZIP/POSTAL CODE _____

SECRETARY _____ EMAIL _____
MAILING ADDRESS _____ PHONE () _____
CITY _____ STATE/PROV _____ ZIP/POSTAL CODE _____

TREASURER _____ EMAIL _____
MAILING ADDRESS _____ PHONE () _____
CITY _____ STATE/PROV _____ ZIP/POSTAL CODE _____

AUDITOR 1 _____ EMAIL _____
MAILING ADDRESS _____ PHONE () _____
CITY _____ STATE/PROV _____ ZIP/POSTAL CODE _____

AUDITOR 2 _____ EMAIL _____
MAILING ADDRESS _____ PHONE () _____
CITY _____ STATE/PROV _____ ZIP/POSTAL CODE _____