

**PERSONAL HISTOIRE FOR 2019-2020**

*Attach Photo*

**PERSONAL**

Your Name: \_\_\_\_\_ Your Office/Chairmanship: \_\_\_\_\_

The name and relationship of the person through which you gained eligibility. Please include if your eligibility is through your own service.

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Branch of Service: \_\_\_\_\_

**EIGHT AND FORTY**

Name and Number of Salon: \_\_\_\_\_

Are you a Charter Partner? \_\_\_\_\_ Year Joined: \_\_\_\_\_

Petite Salon Offices Held:

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Departmental Offices Held:

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National Offices Held:

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OTHER INFORMATION YOU WOULD LIKE TO SHARE:

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***Feel free to add another sheet if you have further information you would like to submit on your personal history.***

***Submit to L'Arhiviste Nationale, Patty Garrett, 3909 W. Sexton St., Battlefield, MO 65619-8103 or email to: [garmrt@hotmail.com](mailto:garmrt@hotmail.com)***