



Report of New Officers
(Tshabxo Cov Tsavxwm Tshiab)
For Year \_\_\_\_\_

Church Name: \_\_\_\_\_
City: \_\_\_\_\_ State: \_\_\_\_\_
Total number of women in your church: \_\_\_\_\_

1. Director (Thawj Niamtsev)

Mrs. (Niam): \_\_\_\_\_ DOB: \_\_\_\_\_
Legal Name (for mailing purpose only) \_\_\_\_\_
Address: \_\_\_\_\_
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_
Phone (home): \_\_\_\_\_ (Cell): \_\_\_\_\_ Email: \_\_\_\_\_

2. Assistant Director - If applicable (Lwm Thawj Niamtsev - Yog tias muaj)

Mrs. (Niam): \_\_\_\_\_ DOB: \_\_\_\_\_
Legal Name (for mailing purpose only) \_\_\_\_\_
Address: \_\_\_\_\_
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_
Phone (home): \_\_\_\_\_ (Cell): \_\_\_\_\_ Email: \_\_\_\_\_

3. Secretary (Teevntawv)

Mrs. (Niam): \_\_\_\_\_ DOB: \_\_\_\_\_
Legal Name (for mailing purpose only) \_\_\_\_\_
Address: \_\_\_\_\_
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_
Phone (home): \_\_\_\_\_ (Cell): \_\_\_\_\_ Email: \_\_\_\_\_

4. Treasurer (Cianyiaj)

Mrs. (Niam): \_\_\_\_\_ DOB: \_\_\_\_\_
Legal Name (for mailing purpose only) \_\_\_\_\_
Address: \_\_\_\_\_
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_
Phone (home): \_\_\_\_\_ (Cell): \_\_\_\_\_ Email: \_\_\_\_\_

5. Fellowship Coordinator (Tus Saib Kev Sib Txoos Uake)

Mrs. (Niam): \_\_\_\_\_ DOB: \_\_\_\_\_
Legal Name (for mailing purpose only) \_\_\_\_\_
Address: \_\_\_\_\_
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_
Phone (home): \_\_\_\_\_ (Cell): \_\_\_\_\_ Email: \_\_\_\_\_

6. Discipleship Coordinator (Tus Saib Kev Cobqhia Thwjtim)

Mrs. (Niam): \_\_\_\_\_ DOB: \_\_\_\_\_
Legal Name (for mailing purpose only) \_\_\_\_\_
Address: \_\_\_\_\_
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_
Phone (home): \_\_\_\_\_ (Cell): \_\_\_\_\_ Email: \_\_\_\_\_

**7. Outreach Coordinator (Tus Saib Kev Tshajtawm)**

Mrs. (Niam): \_\_\_\_\_ DOB: \_\_\_\_\_  
Legal Name (for mailing purpose only) \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Phone (home): \_\_\_\_\_ (Cell): \_\_\_\_\_ Email: \_\_\_\_\_

**8. Missions Coordinator (Tus Saib Kev Xa Moozoo)**

Mrs. (Niam): \_\_\_\_\_ DOB: \_\_\_\_\_  
Legal Name (for mailing purpose only) \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Phone (home): \_\_\_\_\_ (Cell): \_\_\_\_\_ Email: \_\_\_\_\_

**9. Prayer Coordinator (Tus Saib Kev Thov Vajtswv)**

Mrs. (Niam): \_\_\_\_\_ DOB: \_\_\_\_\_  
Legal Name (for mailing purpose only) \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Phone (home): \_\_\_\_\_ (Cell): \_\_\_\_\_ Email: \_\_\_\_\_

**10. Others (Lwm Tus Tsavxwm)**

Mrs. (Niam): \_\_\_\_\_ DOB: \_\_\_\_\_  
Legal Name (for mailing purpose only) \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Phone (home): \_\_\_\_\_ (Cell): \_\_\_\_\_ Email: \_\_\_\_\_

**11. Senior Pastor’s Wife (Tus Niam Xibhwb Laus)**

Mrs. (Niam): \_\_\_\_\_ DOB: \_\_\_\_\_  
Legal Name (for mailing purpose only) \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Phone (home): \_\_\_\_\_ (Cell): \_\_\_\_\_ Email: \_\_\_\_\_

**12. Assistant Pastor’s Wife (Tus Niam Xibhwb Pab)**

Mrs. (Niam): \_\_\_\_\_ DOB: \_\_\_\_\_  
Legal Name (for mailing purpose only) \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Phone (home): \_\_\_\_\_ (Cell): \_\_\_\_\_ Email: \_\_\_\_\_

\_\_\_\_\_  
Director’s Signature

\_\_\_\_\_  
Date

**Mail or Email to the Secretary of Alliance Women Ministries of the Hmong District  
(Deadline – December 31st)**

**Mail to: Alliance Women Ministries  
Attn: Xong Xiong (N. Kx. Zoov Ntxhees Xyooj)  
5709 N. E. 60th Avenue, Portland, OR 97218**

**or Email to [awsecretary@hmongdistrict.org](mailto:awsecretary@hmongdistrict.org)**