

**Information must be submitted back to MDHA by 9/1/11**

**Michigan Dental Hygienists' Association  
2310 Jolly Oak Road, Okemos, MI 48864  
Phone 517/381-8557 Fax 517/349-5818**

**COMPONENT OFFICERS  
PLEASE ADD YOUR CREDENTIALS**

**Component:** \_\_\_\_\_ **Election Date:** \_\_\_\_\_

**Report Completed By:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Title:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**TRUSTEE (as of October 2011 after HOD)**

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

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

E-mail: \_\_\_\_\_

Telephone: Home \_\_\_\_\_ Work \_\_\_\_\_

**President**

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

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

E-mail: \_\_\_\_\_

Telephone: Home \_\_\_\_\_ Work \_\_\_\_\_

**Editor**

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

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

E-mail: \_\_\_\_\_

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