

RESUME
RETURN TO FLYER BOX

Date: _____

Lot #: _____

NAME _____

BORN IN: _____ DATE: _____

MOVED TO FLORAL LAKES: YEAR: _____ FROM: _____

MILITARY SERVICE: BRANCH _____ FROM _____ TO _____

WAR: _____ RANK: _____

MEDALS: _____

PROFESSION OR TRADE: _____

YEAR RETIRED: _____

CHURCH AFFILIATION: _____

OFFICE HELD: _____ DATE: _____

OTHER ORGANIZATIONS AFFILIATION: _____

OFFICE HELD: _____

COMMITTEES SERVED ON: _____

FLORAL LAKES HOMEOWNERS ASSOCIATION BOARD

YEAR: _____ POSITION HELD: _____

FLORAL LAKES SOCIAL CLUB BOARD

YEAR: _____ POSITION HELD: _____

RELATIVES RESIDING IN FLORAL LAKES: _____

ADDITIONAL INFORMATION: _____

(Use Other Side If Needed)