

AMERICAN LEGION AUXILIARY - DEPARTMENT OF WASHINGTON
UNIT OFFICERS LIST **DUE MAY 31st**
COMPLETE AND RETURN TO DEPARTMENT SECRETARY PO BOX 5867, LACEY, WA 98509

UNIT _____ UNIT # _____ DISTRICT # _____

PRESIDENT

NAME _____ STREET ADDRESS _____ CITY _____ ZIP _____
PHONE # _____ E-MAIL (IF APPLICABLE) _____

VICE PRESIDENT

NAME _____ STREET ADDRESS _____ CITY _____ ZIP _____
PHONE # _____ E-MAIL (IF APPLICABLE) _____

SECRETARY

NAME _____ STREET ADDRESS _____ CITY _____ ZIP _____
PHONE # _____ E-MAIL (IF APPLICABLE) _____

TREASURER

NAME _____ STREET ADDRESS _____ CITY _____ ZIP _____
PHONE # _____ E-MAIL (IF APPLICABLE) _____

MEMBERSHIP

NAME _____ STREET ADDRESS _____ CITY _____ ZIP _____
PHONE # _____ E-MAIL (IF APPLICABLE) _____

These officers to be installed _____ (date) and shall assume office upon close of Department Convention.

Meet on _____ at (time) _____

Place _____ Unit Dues Seniors _____ Unit Dues Juniors _____

Please check box if info same as previous years Roster.