AMERICAN LEGION AUXILIARY – DEPARTMENT OF IOWA
2018 - 2019 UNIT OFFICERS LIST

Send this copy to AMERICAN LEGION AUXILIARY, 720 Lyon Street, Des Moines, IA 50309
Send a copy of this form to each of your County and District Presidents. **Unit Senior Dues $ _____**
Keep a copy for your Unit records. **Unit Junior Dues $ _____**
Please fill in all blanks. Send by June 15, 2018.

DISTRICT # _____
COUNTY _____
UNIT TOWN _____
UNIT # _____

PLEASE TYPE OR PRINT (in ink) AND FILL IN ALL INFORMATION.

FORMS **MUST** BE IN DEPARTMENT OFFICE BY **JUNE 15, 2018**. **Notify Department Office of any changes after that date. Fill in all blanks.**

PRESIDENT _____ _____
NAME **PRINT MEMBERSHIP CARD NUMBER ON YOUR MEMBERSHIP CARD**

_____ _____
MAILING ADDRESS **U.P.S. ADDRESS**

_____ (_____)_____ _____
CITY/STATE/ZIP **AREA CODE/TELEPHONE NUMBER** **FAX and/or E-MAIL**

NAME & E-MAIL ADDRESS **MAILING ADDRESS** **CITY/STATE/ZIP** **AREA CODE/TELEPHONE NUMBER**

VICE PRESIDENT: _____(_____)_____

SECRETARY: _____(_____)_____

TREASURER: _____(_____)_____

CHAPLAIN: _____(_____)_____

HISTORIAN: _____(_____)_____

MEMBERSHIP _____(_____)_____

JUNIOR _____(_____)_____

GIRLS STATE _____(_____)_____

EDUCATION _____(_____)_____

What day of the month do you hold your meeting? _____ Time of meeting _____ Phone Number of Post Home _____

Location/address of meeting or Post Home _____

NAME _____ **E-mail address** _____
Name and E-mail address of a contact person in your Unit other than Unit President.