AMERICAN LEGION AUXILIARY
DEPARTMENT OF IOWA
720 LYON ST, DES MOINES, IA 50309

Phone: 515-282-7987
Website: iowaala.org
Email: alacustomerservice@ialegion.org

Please complete and return this form to the Department Office immediately following the election of Unit Officers. Please complete this form even if your slate of officers will not change for the upcoming administrative year. Verify email addresses and phone numbers before submitting this form.

Return this form to the Department Office (address-above) no later than June 30th.

Membership Year	

Unit Town:	Unit #:
Unit Name:	District#:
Time and Date of Unit Meeting	
Date Unit Officers will take Office	

Please provide a complete mailing address for each unit officer.

President:	**Membership ID#:**
Address:	
City:	Zip:
Email:	Cell:

Vice President:	**Membership ID#:**
Address:	
City:	Zip:
Email:	Cell:

Secretary:	**Membership ID#:**
Address:	
City:	Zip:
Email:	Cell:

Treasurer:	**Membership ID#:**
Address:	
City:	Zip:
Email:	Cell:

Membership:	**Membership ID#:**
Address:	
City:	Zip:
Email:	Cell:

Girls State Chair:	**Membership ID#:**
Address:	
City:	**Zip:**
Email:	**Cell:**

Unit Email Contact: Please provide the email address of one person to serve as a Unit Email Contact. This person does not need to be the Unit President. This email address will be used to distribute time-sensitive information.

Email Contact:	**Email:**