Due April 30th

____ District Officers List For the year of _____

Page 1 of 2

District President	District Vice President	District Vice President		
Name	Name	Name		
Address	Address	Address		
City, State, Zip	City, State, Zip	City, State, Zip		
Daytime Phone		Daytime Phone		
Membership #		Membership #		
Email Address	Email Address	Email Address		
Unit # & Town		Unit # & Town		
District Secretary	District Treasurer	District Chaplain		
Name	Name	Name		
Address	Address	Address		
City, State, Zip	City, State, Zip	City, State, Zip		
Daytime Phone	Daytime Phone	Daytime Phone		
Membership #	Membership #	Membership #		
Email Address	Email Address	Email Address		
Unit # & Town	Unit # & Town	Unit # & Town		
District Historian	District Parliamentarian	District Membership Chairman		
Name	Name	Name		
Address	Address	Address		
City, State, Zip	City, State, Zip	City, State, Zip		
Daytime Phone		Daytima Phana		
Membership #		M 1 1		
Email Address	T	Email Address		
Unit # & Town	Unit # & Town	Unit # & Town		

Due April 30th	District Officers List For the Year of		Page 2 of 2
District Girls State Chairman	District Junior Activities Chairma	n	
Name	Name		
Address	Address		
City, State, Zip	City, State, Zip		
Daytime Phone	Daytime Phone		
Membership #	Membership #		
Email Address	Email Address		
Unit # & Town	II. '4 # 0 Tr		
	OUR DISTRICT PAY \$		

You may **EMAIL** this form to <u>alamembership@ialegion.org</u>

ALSO SEND COPY to incoming **DISTRICT PRESIDENT** BY **APRIL 30**.

NOTE: All blanks must be filled in.

Please use street addresses for UPS delivery as well as Box Numbers if used in mailing address.