

AMERICAN LEGION AUXILIARY
DEPARTMENT OF FLORIDA
PO BOX 547917
ORLANDO FL 32854-7917

2011-2012
UNIT OFFICER'S LIST

This form must be returned following Unit elections or no later than June 17, 2011. No membership cards or bulletins will be sent to a Unit until this form is received at Department Headquarters! **No other format will be accepted.**

Verify all mailing addresses. A Unit address is required. Report changes and corrections to this form using an Officer Change Form. **Note: Daytime telephone numbers are required for President and Membership Chairman.** Units can have only one (1) election of officers each year! All changes in officers must be handled according to the Unit's Constitution & Bylaws. Please provide the **day of the month and time for your meetings** for the web site. **EIN & Corporation numbers are required.**

Unit Name _____ Unit # _____ District # _____

Unit's Mailing address: _____
(Street address or PO Box #)

(City) (State) (Zip)

Date of election _____ Area Code _____ Meetings are held (day & time) _____
(Example: 3rd Tuesday ea Month at 7:00 PM)

Unit EIN # _____ Corporation # **N** _____

PRINT OR TYPE PLEASE!

President _____

Secretary _____

Membership ID# _____

Membership ID# _____

Address _____

Address _____

Daytime phone # _____

Daytime phone # _____

Email Address _____

Email Address _____

Membership Chairman _____

Treasurer _____

Membership ID# _____

Membership ID# _____

Address _____

Address _____

Daytime phone # _____

Phone # _____

Email Address _____

Email Address _____

Vice President _____
Address _____

Phone # _____
Email Address _____

Chaplain _____
Address _____

Phone # _____
Email Address _____

2nd Vice President _____
Address _____

Phone # _____
Email Address _____

Sgt-at-Arms _____
Address _____

Phone # _____
Email Address _____

Historian _____
Address _____

Phone # _____
Email Address _____

**LIST THE 3 MEMBERS AT LARGE ELECTED TO THE EXECUTIVE COMMITTEE:
All members elected to an office and appearing already on this form can not be listed here.
These must be three different members!**

**BE SURE BOTH SIDES OF THIS FORM ARE COMPLETE AND LEGIBLE
NOTIFY DEPARTMENT HEADQUARTERS IMMEDIATELY IF THERE IS A CHANGE FROM
WHAT IS BEING REPORTED ON THIS FORM.
Remember all addresses changes MUST be reported using a
Member Data Form & and an Officer's Change Form**