AMERICAN LEGION AUXILIARY DEPARTMENT OF FLORIDA, INC 1912 A LEE RD ORLANDO, FLORIDA 32810 For the day/time of meetings: Please write exactly which day of the week they are held each month Ex: 1st Thursday, at 5 pm.

2024-2025

UNIT OFFICERS' LIST

This form must be returned within 10 days of Unit elections or no later than May 31, 2024. No membership packets will be provided until this form is received at Department Headquarters! No other format will be accepted. All 2024 dues must be paid at the time of elections! All information is required on this form.

Unit Name: American Legion Auxiliary	_ _{Unit #} _139	District # 15	
Unit's Mailing Address: 3818 W Bay Vista Ave			
(Street address	or PO Box)	Tampa	33611
Unit Email Address: Post139@gmail.com		(City)	(Zip)
	Day/Time Meeti	ng are Held_1st Tueso	day 6:35pm
Unit EIN# 26-3441912	Corporation #		
Must check each box to confirm that the Unit has v	verified each Off	icer's current yr due	s are naid.
President: Judith Hilinski		ident: Bonnie Af	
Member # 302714582	Member # 30	1466898	
Daytime Phone: (330)714-8741	Davtime Phone:	(813)748-764	-2
Email: hilinskj@gmail.com		abaybonnie@ho	
2 nd Vice President:		resident:	
Member #	Member #		
Daytime Phone:	Daytime Phone:		
Email:	Email:		
secretary:_Rita Smith		Jennifer Vick	rey
301466904		1805802	
Daytime Phone: (813)431-3020	Daytime Phone	(703)201-983	35
Email: apwurita@hotmail.com	_ _{Email:} vickr	ey.jen@yahoo	.com

Chaplain: Jan Bertoch	Historian:		
2017/6752	Member #		
Daytime Phone: (813)404-6565	Daytime Phone:		
Email:	Email:		
sgt-at-Arms: Sharon Dobson	Membership: Bonnie Atwood		
Member# 302866694	Member #_ 301466898		
Daytime Phone: (703)850-7767	Daytime Phone: (813)748-7642		
Email: sharon8275@verizon.net	_ Email:		
Member at Large: Lisa Davitt	Member at Large		
Member#_ 301873926	Member #		
Daytime Phone: (501)310-3999	Daytime Phone:		
Email: arky2323@gmailcom	Email:		
Member at Large:	Member at Large:		
Member #	Member #		
Daytime Phone:			
Email:	Email:		
Member at Large:	Member at Large:		
Member#	Member#		
Daytime Phone:	Daytime Phone:		
Email:	Email:		
Completed By: Judith Hilinski	Date: <u>7/5/24</u>		

Return Form to Department: Email: membership@alafl.org