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: PIPER-Gardner	Unit #
Unit's Mailing Address: P.O. BOX 1112	
(Street address	or PO Box) Melisoume 3290 Z (City) (Zip)
Unit Email Address: 23 heavens entegnast. Com	
Date of Election <u>5/14/24</u> Unit EIN# <u>59-3498994</u>	Day/Time Meeting are Held / ATUCS e 7:00 PM Corporation # 19000003716
Must check each box to confirm that the Unit has v	erified each Officer's current yr dues are paid.
President: Veven Finerson	Vice President: Shirley Finerson
Member # 300957196	Member # 300736413
Daytime Phone: 321-604-8687	Daytime Phone: 32/-917-86 23
Email: 23 heavensentegMa:1.com	Email: STFINERSONE Ad. Com
2 nd Vice President: TACKIC Smalls 3 rd Vice President:	
Member #_/34 73 0 853	Member #
Daytime Phone: 321-557-2937	Daytime Phone:
Email: SMQIIJDE9mail, Com	Email:
Secretary: Electon McNeil	Treasurer: Psyche Taylor
Member #	_Member# <u>301068376</u>
Daytime Phone: 321-961-0453	_ Daytime Phone: 321-544-4033
Email: Elector, menersegmant, co	MEmail: Nassaugird yoe outlook, Com

Chaplain: JenniFer Buggs	Historian: Vanessa White
Member # 30181841	Member # 300236543
Daytime Phone: 321-298-0979	Daytime Phone: 321-255-19 10
Email: NA	Email: Vanessawhite Dexteregmaile
Sgt-at-Arms: Willie Mac Graham	Membership: Shirley 7 incisum
Member # 300 223 065	Member # 300736413
Daytime Phone: 32/-537 -7557	
Email: Waraham 15 CCFL, Or, Com	Email: STFINCTSON & AOL. Com
Member at Large Shirley Finerson Member at Large	
Member #	Member #
Daytime Phone:	Daytime Phone:
Email:	Email:
Member at Large:	Member at Large:
	Member #
Daytime Phone:	Daytime Phone:
Email:	Email:
Member at Large:	Member at Large:
Member #	Member #
Daytime Phone:	Daytime Phone:
Email:	Email:
Completed By:	Date:

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