

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

MAY 22 2024



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 # Florida 239 District # 6

Unit's Mailing Address: PO Box 932
(Street address or PO Box)

Groveland 34736
(City) (Zip)

Unit Email Address: karin@bocabanana.com

Date of Election May 20, 2024 Day/Time Meeting are Held Monday, 6PM

Unit EIN# 384222624 Corporation # N22000004717

Must check each box to confirm that the Unit has verified each Officer's current yr dues are paid.

President: Christina Williams **Vice President:** _____
Member # 130764880 Member # _____
Daytime Phone: 772-341-4067 Daytime Phone: _____
Email: office@alexcustombuild.com Email: _____

2nd Vice President: _____ **3rd Vice President:** _____
Member # _____ Member # _____
Daytime Phone: _____ Daytime Phone: _____
Email: _____ Email: _____

Secretary: Karin Biega **Treasurer:** same as Secretary
Member # 120936043 Member # _____
Daytime Phone: 321-403-5660 Daytime Phone: _____
Email: karin@bocabanana.com Email: _____

Chaplain: _____

Member # _____

Daytime Phone: _____

Email: _____

Historian: _____

Member # _____

Daytime Phone: _____

Email: _____

Sgt-at-Arms: _____

Member # _____

Daytime Phone: _____

Email: _____

Membership: _____

Member # _____

Daytime Phone: _____

Email: _____

Member at Large: Vicky Hess

Member # 302616897

Daytime Phone: 727-452-2252

Email: vickyelvisg@aol.com

Member at Large _____

Member # _____

Daytime Phone: _____

Email: _____

Member at Large: _____

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Member at Large: _____

Member # _____

Daytime Phone: _____

Email: _____

Member at Large: _____

Member # _____

Daytime Phone: _____

Email: _____

Completed By: _____

Date: _____

Return Form to Department:

Email: membership@alaf1.org