

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.

MAY 2 3 2024
✓ (B)

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: Gulfstream Unit 310-American Legion Auxiliary Unit # 310 District # 9

Unit's Mailing Address: 225 SE 1st Avenue
(Street address or PO Box)
Hallandale Beach 33009
(City) (Zip)

Unit Email Address: debbief429@gmail.com

Date of Election 4/24/24 Day/Time Meeting are Held Wednesday @ 6:00 PM

Unit EIN# 80-0808010 Corporation # _____

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

President: Deborah Frieders
Member # 301178038
Daytime Phone: 786-897-1567
Email: debbief429@gmail.com

Vice President: Pamela Rupert
Member # 301496007
Daytime Phone: 954-598-1339
Email: _____

2nd Vice President: Lorraine Socquet
Member # 302932909
Daytime Phone: 954-652-8407
Email: _____

3rd Vice President: Barbara Socull
Member # 301708785
Daytime Phone: 954-454-3821
Email: _____

Secretary: Ann Larsen
Member # 301765823
Daytime Phone: 305-318-1016
Email: _____

Treasurer: Linda Cookman
Member # 301523003
Daytime Phone: 954-983-9895
Email: _____

Chaplain: Ann Larsen

Member # 301765823

Daytime Phone: 305-318-1016

Email: _____

Historian: Christina Bendfield

Member # 302516134

Daytime Phone: 756-277-8772

Email: christy-y@hotmail.com

Sgt-at-Arms: Kathy Conover

Member # 300941209

Daytime Phone: 954-801-9002

Email: _____

Membership: Deborah Frieders

Member # 301178038

Daytime Phone: 786-897-1567

Email: debbief429@gmail.com

Member at Large: _____

Member # _____

Daytime Phone: _____

Email: _____

Member at Large _____

Member # _____

Daytime Phone: _____

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Member at Large: _____

Member # _____

Daytime Phone: _____

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Member at Large: _____

Member # _____

Daytime Phone: _____

Email: _____

Member at Large: _____

Member # _____

Daytime Phone: _____

Email: _____

Member at Large: _____

Member # _____

Daytime Phone: _____

Email: _____

Completed By: Deborah Frieders

Date: 5-23-24

Return Form to Department: _____ Email: membership@alaf1.org