

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: 1<sup>st</sup> Thursday, at 5 pm.



2025-2026

UNIT OFFICERS' LIST

This form must be returned within 10 days of Unit elections or no later than May 29, 2025. No membership packets will be provided until this form is received at Department Headquarters! No other format will be accepted. **All 2025 dues must be paid at the time of elections!** All information is required on this form.

Unit Name: Rabe O Wilson Unit # 38 District # 13  
Unit's Mailing Address: 1857 Jackson Street  
(Street address or PO Box) Fort Myers 33903  
(City) (Zip)  
Unit Email Address: chuckandtina1@gmail.com

Date of Election May 7 2025 Day/Time Meeting are Held wed 6pm  
Unit EIN# 56-6150997 Corporation # \_\_\_\_\_

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

☒ **President:** Tina Stewart ☐ **Vice President:** \_\_\_\_\_  
Member # 301136841 Member # \_\_\_\_\_  
Daytime Phone: 239-872-6449 Daytime Phone: \_\_\_\_\_  
Email: chuchandtina1@gmail.com Email: \_\_\_\_\_

☐ **2<sup>nd</sup> Vice President:** \_\_\_\_\_ ☐ **3<sup>rd</sup> Vice President:** \_\_\_\_\_  
Member # \_\_\_\_\_ Member # \_\_\_\_\_  
Daytime Phone: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_  
Email: \_\_\_\_\_ Email: \_\_\_\_\_

☒ **Secretary:** Julie Bair ☐ **Treasurer:** Julie Bair  
Member # 301731705 Member # 301731705  
Daytime Phone: 239 600 0392 Daytime Phone: \_\_\_\_\_  
Email: jujubair@aol.com Email: \_\_\_\_\_

☒ Chaplain: Yolanda Range

Member # 302963371

Daytime Phone: 813-531-2545

Email: \_\_\_\_\_

☐ Historian: \_\_\_\_\_

Member # \_\_\_\_\_

Daytime Phone: \_\_\_\_\_

Email: \_\_\_\_\_

☐ Sgt-at-Arms: \_\_\_\_\_

Member # \_\_\_\_\_

Daytime Phone: \_\_\_\_\_

Email: \_\_\_\_\_

☐ Membership: \_\_\_\_\_

Member # \_\_\_\_\_

Daytime Phone: \_\_\_\_\_

Email: \_\_\_\_\_

☐ Member at Large: \_\_\_\_\_

Member # \_\_\_\_\_

Daytime Phone: \_\_\_\_\_

Email: \_\_\_\_\_

☐ Member at Large \_\_\_\_\_

Member # \_\_\_\_\_

Daytime Phone: \_\_\_\_\_

Email: \_\_\_\_\_

☐ Member at Large: \_\_\_\_\_

Member # \_\_\_\_\_

Daytime Phone: \_\_\_\_\_

Email: \_\_\_\_\_

☐ Member at Large: \_\_\_\_\_

Member # \_\_\_\_\_

Daytime Phone: \_\_\_\_\_

Email: \_\_\_\_\_

☐ 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](mailto:membership@alaf1.org)