

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.

RECEIVED

JUN 9 2025

Verified &
entered P

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: Palm Coast Unit # 115 District # 17

Unit's Mailing Address: 2 Pine Cone Drive, PO Box 351147
(Street address or PO Box) Palm Coast, FL
(City) (Zip)

Unit Email Address: SH115Auxiliary@yahoo.com

Date of Election July Day/Time Meeting are Held 1st Thur of Month.

Unit EIN# Corporation #

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

☒ President: Sally Hayes

Member # 301435850

Daytime Phone: 386-503-0049

Email: SH115Auxiliary@yahoo.com

☐ Vice President:

Member #

Daytime Phone:

Email:

☐ 2nd Vice President:

Member #

Daytime Phone:

Email:

☐ 3rd Vice President:

Member #

Daytime Phone:

Email:

☒ Secretary: Karen Marks

Member # 302609408

Daytime Phone: 727-857-6923

Email: geneandkarenm@verizon.net

☒ Treasurer: Karen Smith

Member # 300031965

Daytime Phone: 386 445 5346

Email: Karenicolours@gmail.com

☒ Chaplain: Mary Beck

Member # 301372982

Daytime Phone: 386-237-8471

Email: rbeck84@cflo rr.com

☐ Historian: _____

Member # _____

Daytime Phone: _____

Email: _____

☐ Sgt-at-Arms: _____

Member # _____

Daytime Phone: _____

Email: _____

☒ Membership: _____

Member # _____

Daytime Phone: _____

Email: _____

☒ (membership)
Member at Large: Dagmar Lockwith

Member # 300406941

Daytime Phone: 386-225-0901

Email: dagmar.lockwith@yahoo
.com

☐ 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: Sal St Hayes

Date: 06-05-2025

Return Form to Department:

Email: membership@alafi.org

Auxiliary 125 Revised 4/7/2025