

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.

Rec'd at Conu
verified &
entered
⑦

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: Warrington Unit # 240 District # 1
Unit's Mailing Address: 8666 Gulf Beach Hwy
(Street address or PO Box) Pensacola 32507
(City) (Zip)
Unit Email Address: Auxiliary@Americanlegionpost240@.org

Date of Election 6-10-25 Day/Time Meeting are Held Tues 7:00pm
Unit EIN# _____ Corporation # _____

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

☐ **President:** Amy Quinn ☐ **Vice President:** Shirley Armstrong
Member # 301733125 Member # 301523263
Daytime Phone: 612-716-4714 Daytime Phone: 850-382-5152
Email: grandmadutchess@gmail.com Email: sramstrong26@aol.com

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

☐ **Secretary:** Verna Coker ☐ **Treasurer:** Brenda English
Member # 302695529 Member # 300730461
Daytime Phone: _____ Daytime Phone: 850-378-0124
Email: verna.mckn@gmail.com Email: benqlish61657@gmail.com

☐ 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: _____

Member # _____

Daytime Phone: _____

Email: _____

☐ Member at Large _____

Member # _____

Daytime Phone: _____

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Email: _____

☐ Member at Large: _____

Member # _____

Daytime Phone: _____

Email: _____

☐ Member at Large: _____

Member # _____

Daytime Phone: _____

Email: _____

Completed By: _____ Date: _____

Return Form to Department:

Email: membership@alafl.org