



# District \_\_\_\_\_ Officers and Chairman List 20\_\_\_\_ - \_\_\_\_\_

(Due to Department by September 30th)

*These Officers are to be installed on \_\_\_\_\_ (date) and shall assume office upon close of Department Convention.*

*Our Unit meets on \_\_\_\_\_ (day of the week) at \_\_\_\_\_ (time) at \_\_\_\_\_ (address).*

*\_\_\_\_\_The below listed members are in good standing and dues have been remitted to members own unit **no later than Dec 1.***

President	Name _____ Member # _____ Phone _____ Email/Address if no email _____
Vice President	Name _____ Member # _____ Phone _____ Email/Address if no email _____
Membership	Name _____ Member # _____ Phone _____ Email/Address if no email _____
Secretary	Name _____ Member # _____ Phone _____ Email/Address if no email _____
Chaplain	Name _____ Member # _____ Phone _____ Email/Address if no email _____
Remit to	Name _____ Member # _____ Phone _____ Email/Address if no email _____
Historian	Name _____ Member # _____ Phone _____ Email/Address if no email _____
Treasurer	Name _____ Member # _____ Phone _____ Email/Address if no email _____

Americanism

Name \_\_\_\_\_ Member # \_\_\_\_\_ Phone \_\_\_\_\_

Email/Address if no email \_\_\_\_\_

Aux. Emerg.

Name \_\_\_\_\_ Member # \_\_\_\_\_ Phone \_\_\_\_\_

Fund

Email/Address if no email \_\_\_\_\_

Children &

Name \_\_\_\_\_ Member # \_\_\_\_\_ Phone \_\_\_\_\_

Youth

Email/Address if no email \_\_\_\_\_

Community

Name \_\_\_\_\_ Member # \_\_\_\_\_ Phone \_\_\_\_\_

Service

Email/Address if no email \_\_\_\_\_

Const. & Bylaws

Name \_\_\_\_\_ Member # \_\_\_\_\_ Phone \_\_\_\_\_

Email/Address if no email \_\_\_\_\_

Edu. &

Name \_\_\_\_\_ Member # \_\_\_\_\_ Phone \_\_\_\_\_

Scholarships

Email/Address if no email \_\_\_\_\_

GIRLS STATE

Name \_\_\_\_\_ Member # \_\_\_\_\_ Phone \_\_\_\_\_

Email/Address if no email \_\_\_\_\_

Junior Activities

Name \_\_\_\_\_ Member # \_\_\_\_\_ Phone \_\_\_\_\_

Email/Address if no email \_\_\_\_\_

Leadership	Name_____ Member # _____ Phone_____
	Email/Address if no email_____
Legislative	Name_____ Member # _____ Phone_____
	Email/Address if no email_____
National Security	Name_____ Member # _____ Phone_____
	Email/Address if no email_____
Poppy	Name_____ Member # _____ Phone_____
	Email/Address if no email_____
Public Relations	Name_____ Member # _____ Phone_____
	Email/Address if no email_____
Sergeant-at Arms	Name_____ Member # _____ Phone_____
	Email/Address if no email_____
VA & R	Name_____ Member # _____ Phone_____
	Email/Address if no email_____

Email: <https://walegion-aux.org>

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