

District #:

## 2021-2022 DISTRICT OFFICERS

Office use only/Rcvd

Complete information on this form (**type or print**) and return to Department Headquarters.  
Make a copy for your own records.

**Due by July 1, 2021**

**Send to:** American Legion Auxiliary  
Department of Oklahoma Headquarters  
P.O. Box 14562  
Oklahoma City, OK 73113

**or email:** [auxdeptok@sbcglobal.net](mailto:auxdeptok@sbcglobal.net)

DISTRICT EIN #

Yearly 990N Filed

YES ☐

NO ☐

**MAIL GOES TO:**

Title:

Name

Mailing Address:

City

State

ZIP

How many District meetings do you hold yearly?

Amount of 2022 District Per Capita:

Senior \$

Junior \$

**I hereby certify that each officer or chairman are American Legion Auxiliary members in good standing.**

(Signed)

(District President or Secretary)

**PRESIDENT**

Name

Member ID#

Mailing Address:

City

State

ZIP

Telephone #: Home:

Cell:

Work:

Email:

District #:

## 2021-2022 DISTRICT OFFICERS

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### Department Executive Committee Member

Name  Member ID#   
Mailing Address:   
City  State  ZIP   
Telephone #: Home:  Cell:  Work:   
Email:

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### FIRST VICE PRESIDENT

Name  Member ID#   
Mailing Address:   
City  State  ZIP   
Telephone #: Home:  Cell:  Work:   
Email:

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### SECOND VICE PRESIDENT

Name  Member ID#   
Mailing Address:   
City  State  ZIP   
Telephone #: Home:  Cell:  Work:   
Email:

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### SECRETARY

Name  Member ID#   
Mailing Address:   
City  State  ZIP   
Telephone #: Home:  Cell:  Work:   
Email:

District #:

## 2021-2022 DISTRICT OFFICERS

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### TREASURER

Name  Member ID#   
Mailing Address:   
City  State  ZIP   
Telephone #: Home:  Cell:  Work:   
Email:

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### CHAPLAIN

Name  Member ID#   
Mailing Address:   
City  State  ZIP   
Telephone #: Home:  Cell:  Work:   
Email:

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### HISTORIAN

Name  Member ID#   
Mailing Address:   
City  State  ZIP   
Telephone #: Home:  Cell:  Work:   
Email:

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### SERGEANT-AT-ARMS

Name  Member ID#   
Mailing Address:   
City  State  ZIP   
Telephone #: Home:  Cell:  Work:   
Email:

District #:

## 2021-2022 DISTRICT OFFICERS

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### PARLIAMENTARIAN

Name  Member ID#   
Mailing Address:   
City  State  ZIP\_   
Telephone #: Home:  Cell:  Work:   
Email:

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### ALTERNATE DEC (District President)

Name  Member ID#   
Mailing Address:   
City  State  ZIP\_   
Telephone #: Home:  Cell:  Work:   
Email:

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### ALTERNATE DEC (District DEC)

Name  Member ID#   
Mailing Address:   
City  State  ZIP\_   
Telephone #: Home:  Cell:  Work:   
Email:

District #

## 2021-2022 DISTRICT CHAIRMEN

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### (AEF) AUXILIARY EMERGENCY FUND CHAIRMAN

Name  Member ID#   
Mailing Address:   
City  State  ZIP   
Telephone #: Home:  Cell:  Work:   
Email:

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### AMERICANISM CHAIRMAN

Name  Member ID#   
Mailing Address:   
City  State  ZIP   
Telephone #: Home:  Cell:  Work:   
Email:

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### CAVALCADE OF MEMORIES CHAIRMAN

Name  Member ID#   
Mailing Address:   
City  State  ZIP   
Telephone #: Home:  Cell:  Work:   
Email:

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### CHILDREN & YOUTH CHAIRMAN

Name  Member ID#   
Mailing Address:   
City  State  ZIP   
Telephone #: Home:  Cell:  Work:   
Email:

District #

## 2021-2022 DISTRICT CHAIRMEN

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### COMMUNITY SERVICE CHAIRMAN

Name  Member ID#   
Mailing Address:   
City  State  ZIP   
Telephone #: Home:  Cell:  Work:   
Email:

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### CONSTITUTION & BYLAWS CHAIRMAN

Name  Member ID#   
Mailing Address:   
City  State  ZIP   
Telephone #: Home:  Cell:  Work:   
Email:

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### EDUCATION CHAIRMAN

Name  Member ID#   
Mailing Address:   
City  State  ZIP   
Telephone #: Home:  Cell:  Work:   
Email:

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### FINANCE CHAIRMAN

Name  Member ID#   
Mailing Address:   
City  State  ZIP   
Telephone #: Home:  Cell:  Work:   
Email:

District #

## 2021-2022 DISTRICT CHAIRMEN

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### GIRLS STATE CHAIRMAN

Name  Member ID#

Mailing Address:

City  State  ZIP

Telephone #: Home:  Cell:  Work:

Email:

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### JUNIOR ACTIVITIES CHAIRMAN

Name  Member ID#

Mailing Address:

City  State  ZIP

Telephone #: Home:  Cell:  Work:

Email:

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### LEADERSHIP CHAIRMAN

Name  Member ID#

Mailing Address:

City  State  ZIP

Telephone #: Home:  Cell:  Work:

Email:

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### (CWF) LIAISON CHILD WELFARE FOUNDATION CHAIRMAN

Name  Member ID#

Mailing Address:

City  State  ZIP

Telephone #: Home:  Cell:  Work:

Email:

District #

## 2021-2022 DISTRICT CHAIRMEN

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### NATIONAL SECURITY CHAIRMAN

Name  Member ID#   
Mailing Address:   
City  State  ZIP   
Telephone #: Home:  Cell:  Work:   
Email:

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### POPPY CHAIRMAN

Name  Member ID#   
Mailing Address:   
City  State  ZIP   
Telephone #: Home:  Cell:  Work:   
Email:

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### PUBLIC RELATIONS CHAIRMAN

Name  Member ID#   
Mailing Address:   
City  State  ZIP   
Telephone #: Home:  Cell:  Work:   
Email:

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### VA&R CHAIRMAN (*Veterans Affairs & Rehabilitation, Service to Veterans, & Gifts for Yanks*)

Name  Member ID#   
Mailing Address:   
City  State  ZIP   
Telephone #: Home:  Cell:  Work:   
Email: