



AMERICAN LEGION AUXILIARY, DEPARTMENT OF OHIO, INC.
 1100 Brandywine Blvd., Bldg. D
 ZANESVILLE, OH 43701-7303
 (740) 452-8245 E-mail: amiller@alaohio.org

Unit _____

FOR OFFICE USE ONLY

_____ Ohio _____ National
 _____ Membership Packet Mailed

**2025-2026 CERTIFICATION OF OFFICERS
 MANDATORY!!! MUST BE COMPLETED WITH OR
 WITHOUT CHANGES**

This form must be completed by a **Unit Officer** immediately following election of Unit Officers and returned to Department Headquarters on or before June 1, 2025. If your Unit fails to return this form to Department Headquarters **YOUR UNIT WILL NOT RECEIVE MAIL FROM DEPARTMENT.** This includes Presidents, Secretaries, Treasurers, Unit Membership and Buckeye Girls State information. **PLEASE TYPE OR PRINT CLEARLY. MEMBER ID#s ARE REQUIRED. PLEASE INCLUDE EMAILS.**

DISTRICT # _____ UNIT # _____ CITY _____ COUNTY _____
 UNIT NAME _____

UNIT PRESIDENT NAME
 UNIT PRESIDENT ID NUMBER
 UNIT PRESIDENT E-MAIL ADDRESS—MANDATORY
 UNIT PRESIDENT MAILING ADDRESS
 UNIT PRESIDENT CITY, STATE AND ZIP
 UNIT PRESIDENT PHONE NUMBER

UNIT SECRETARY NAME
 UNIT SECRETARY ID NUMBER
 UNIT SECRETARY E-MAIL ADDRESS—MANDATORY
 UNIT SECRETARY MAILING ADDRESS
 UNIT SECRETARY CITY, STATE AND ZIP
 UNIT SECRETARY PHONE NUMBER

UNIT TREASURER NAME
 UNIT TREASURER ID NUMBER
 UNIT TREASURER E-MAIL ADDRESS—MANDATORY
 UNIT TREASURER MAILING ADDRESS
 UNIT TREASURER CITY, STATE AND ZIP
 UNIT TREASURER PHONE NUMBER

UNIT MEMBERSHIP NAME
 UNIT MEMBERSHIP ID NUMBER
 UNIT MEMBERSHIP E-MAIL ADDRESS—MANDATORY
 UNIT MEMBERSHIP MAILING ADDRESS
 UNIT MEMBERSHIP CITY, STATE AND ZIP
 UNIT MEMBERSHIP PHONE NUMBER

PLACE AND ADDRESS WHERE UNIT MEETINGS ARE HELD _____

DAY OF MONTH OF UNIT MEETING _____ TIME OF UNIT MEETING _____

ALL CHANGES MUST BE SUBMITTED IN WRITING BY THE UNIT PRESIDENT. CHANGES BY PHONE WILL NOT BE ACCEPTED.

COMPLETED BY _____ TITLE _____ DATE _____

FOR OFFICE USE ONLY- DO NOT WRITE IN THIS SECTION

2026 MEMBERSHIP PACKET

Picked up at _____ **Department Convention** _____ **Date**
_____ **Office** _____ **Date**
_____ **Mailed** _____ **Date**

Tracking Information: _____

Printed Name _____

Signature _____