

American Legion Auxiliary Department of South Dakota

Unit Officers & Chairs

Fiscal Year: 2026-2027

Unit #: _____ Town: _____ District #: _____ Please list all information for all officers

Unit Office	Name	Address, City, State, Zip	Email Address	Cell Phone Number
President				
First Vice President				
Second Vice President				
Secretary				
Treasurer				
Chaplain				
Historian				
Parliamentarian				
Remit Dues To				

Regular Unit Meeting Date/Time: _____

No Meetings in These Months: _____

Send to: American Legion Auxiliary Department of South Dakota, PO Box 983, Mitchell, SD 57301 or southdakotaala@gmail.com Send a copy to your District President

Unit Secretary Signature: _____

Date: _____

Unit Office	Name	Address, City, State, Zip	Email Address	Cell Phone Number
Americanism				
Auxiliary Emergency Fund				
Children & Youth				
Community Service				
Constitution & Bylaws				
Education				
Girls State				
Junior Activities				
Leadership				
Legislative				
Membership				
National Security				
Past Presidents Parley				
Poppy				
Public Relations				
Sargent-At-Arms				
Veterans Affairs & Rehabilitation				