

American Legion Auxiliary Department of Nevada

4030 Bobolink Cir., Reno, NV 89508

SPECIAL MEMORANDUM

TO: Unit Secretaries/Presidents

FROM: Daela Gibson, Department Secretary/Treasurer

DATE: 17 April, 2014

SUBJECT: CANDIDATES FOR 2014-2015 DEPARTMENT OFFICES

Please complete this form notifying Department Headquarters of all announced candidates for Department Offices for the 2014-2015 Auxiliary year. Please send this form in with your credentials form back to Department Headquarters. This DOESN'T replace a letter of intent nor will these announcements be listed in the Legionette. Notifying the units and the Legionette is the candidate's responsibility. This is to help the Department Office prepare for the convention.

| ANNOUNCED CANDIDATES FROM UNIT _ | | | |
|----------------------------------|------------------|---|--|
| Office: | | | |
| Name of candidate: | | | |
| Address: | | | |
| City: | | | |
| Primary phone: () | _ Cell phone: (_ |) | |
| Email (required): | | | |
| Office: | | | |
| Name of candidate: | | | |
| Address: | | | |
| City: | | | |
| Primary phone: () | _ Cell phone: (_ |) | |
| Email (required): | | | |

| Office: | | | |
|--------------------|---------------|---------|------|
| Name of candidate: | | | |
| Address: | | | |
| City: | | _State: | Zip: |
| Primary phone: () | Cell phone: (|) | |
| Email (required): | | | |
| Office: | | | |
| Name of candidate: | | | |
| Address: | | | |
| City: | | _State: | Zip: |
| Primary phone: () | Cell phone: (|) | |
| Email (required): | | | |
| Office: | | | |
| Name of candidate: | | | |
| Address: | | | |
| City: | | _State: | Zip: |
| Primary phone: () | Cell phone: (|) | |
| Email (required): | | | |
| Office: | | | |
| Name of candidate: | | | |
| Address: | | | |
| City: | | | |
| Primary phone: () | Cell phone: (|) | |
| Email (required): | | | |