

**SONS OF THE AMERICAN LEGION, DETACHMENT OF MAINE
2024 – 2025 SQUADRON OFFICERS AND DIRECTORY INFORMATION**

DEADLINE FOR SUBMISSION TO DETACHMENT: June 10th

(Name of Squadron) (Location) (Squadron No.)

Squadron address (if you have one, i.e. P.O. Box) _____

Meeting Nights, Time and location _____

ELECTED: _____ (DATE)

COMMANDER _____
(Name) (Mailing Address) (Zip)

(Home telephone) (Cell phone) (E-mail address)

1st Vice Commander _____
(Name) (Mailing Address) (Zip)

(Home telephone) (Cell phone) (E-mail address)

2nd Vice Commander _____
(Name) (Mailing Address) (Zip)

(Home telephone) (Cell phone) (E-mail address)

Adjutant _____
(Name) (Mailing Address) (Zip)

(Home telephone) (Cell phone) (E-mail address)

DEADLINE - JUNE 20th

- OVER -

Membership Chairman _____
(Name) (Mailing Address) (Zip)

(Home telephone) (Cell phone) (E-mail address)

Finance Officer _____
(Name) (Mailing Address) (Zip)

(Home telephone) (Cell phone) (E-mail address)

Chaplain _____
(Name) (Mailing Address) (Zip)

(Home telephone) (Cell phone) (E-mail address)

Historian _____
(Name) (Mailing Address) (Zip)

(Home telephone) (Cell phone) (E-mail address)

Sergeant-at-Arms _____
(Name) (Mailing Address) (Zip)

(Home telephone) (Cell phone) (E-mail address)

Judge Advocate _____
(Name) (Mailing Address) (Zip)

(Home telephone) (Cell phone) (E-mail address)

LEGION ADVISOR _____
(Name) (Mailing Address) (Zip)

(Home telephone) (Cell phone) (E-mail address)

Please fill in the name, street address or Post Office box, town, zip code, telephone numbers and email address of **ALL** officers and return this form to: SONS OF THE AMERICAN LEGION, DETACHMENT OF MAINE, 5 Verti Drive, Suite B, Winslow, ME 04901 or e-mail to: saldetmaine@gmail.com