American Legion Auxiliary
Department of New York
112 State Street, Suite 1310
Albany, New York 12207

Mid Winter Conference 2010

January 22nd & 23rd 2010

County_____ District_____

Unit Name & Number_____

Enclosed is Check #_____ in the amount of $_____

for _____ reservations at $30.00 each.

Please make checks payable to: American Legion Auxiliary, Department of New York

Send to Juanita Lochner, American Legion Auxiliary
112 State Street, Suite 1310
Albany, New York 12207

Members attending:

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