

DLA Auxiliary Nomination Application

I _____, hereby submit my
name for consideration for nomination to the DLA Auxiliary Board.

The election will be held once the membership directory is created.

I believe I would be an asset to the Auxiliary Board of
because _____

Signed (Candidate) _____ **Date** _____

Permanent Address: _____ City: _____

State: _____ Zip: _____

Assembly Park Address: _____

PhoneNumber: _____

Please return this form before the end of day Sunday May 23, 2026 to:

The red Auxiliary Mail Box in the mailroom

or

DLA Auxiliary

1607 Pottawatomi Drive

Delavan, WI 53115

or

Kathleen.fiedler7@gmail.com

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