



District _____ Meeting Sign-In Sheet

Meeting Date: _____ Time: _____ Location: _____

Name

Unit

1 _____	_____
2 _____	_____
3 _____	_____
4 _____	_____
5 _____	_____
6 _____	_____
7 _____	_____
8 _____	_____
9 _____	_____
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16 _____	_____
17 _____	_____
18 _____	_____
19 _____	_____
20 _____	_____



AMERICAN LEGION AUXILIARY • DEPARTMENT OF NORTH DAKOTA

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secretary@ndala.org • www.ndala.org

21	_____	_____
22	_____	_____
23	_____	_____
24	_____	_____
25	_____	_____
26	_____	_____
27	_____	_____
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42	_____	_____
43	_____	_____
44	_____	_____