



ASSOCIATED ADMINISTRATORS OF LOS ANGELES

1910 W. Sunset Blvd., Suite 850
Los Angeles, CA 90026
(213) 484-2226
FAX (213) 484-0201
www.aala.us

Juan A. Flecha
President

ADULT DEPARTMENT

Martha Peralta
Vice President

Anna E. Madrid
Julio Melara
Directors

ELEMENTARY DEPARTMENT

Nery Paiz
Vice President

Tracie Bryant
Richard Guillen
Directors

SECONDARY DEPARTMENT

Dr. Rafael Gaeta
Vice President

Luis Rodriguez-Cazares
Dr. Alex Placencio
Directors

SCHOOL SUPPORT ADMINISTRATORS

Kevin Kilpatrick
Vice President

MaryJane Lira-London
Dr. Victor Gonzalez
Directors

UNIT J CLASSIFIED DEPARTMENT

Phyllis Lott
Vice President

David Montes
Lisa Marine
Directors

STAFF

Dan Isaacs
Dr. Judith Perez
Steve Quon
Administrators

Lorraine Bush
Office Manager

CONSULTANTS

Jeri R. Durham
Charlotte Lerchenmuller
Michael Perez
Jane Pollock

Dr. Lillian Utsumi

FIELD REPRESENTATIVES

Michelle Bennett
Doris Dillard
Dr. Mike O'Sullivan
Sylvia Perea

STRATEGIST

David Tokofsky

LOOC REPRESENTATIVE

Maria Elena Rico-Aguilera

Dear AALA Alumni Members:

I encourage you to send your renewal today to avoid interruptions to your member benefits. The benefits include:

- Receipt of the weekly Update
• Invitation to the Fall Reception
• Invitations to the Fall and Spring Alumni Luncheons
• Updated Health Benefits information
• Updated information regarding LAUSD
• Hearing aids at group savings for member and extended family
• Voluntary insurance at group rates, including auto, homeowners and others

It is easy to renew! Just complete the tear-off below along with your \$45 check, payable to AALA, 1910 West Sunset Boulevard, Suite 850, Los Angeles, CA 90026. Your continued support and participation is important to me and the association.

Sincerely,

[Handwritten signature of Juan A. Flecha]

Juan A. Flecha
President

Tear-off

PLEASE RETURN BY AUGUST 30, 2019

I wish to be an AALA Associate Member in the following department:

___ Adult ___ Elementary ___ Secondary ___ Supervisory ___ Classified

Enclosed is my check for \$45, payable to AALA, for the 2019-2020 school year.

Name _____ Empl. No.: _____

Address _____ City State Zip

Telephone () _____ E-Mail _____

Would you like your name to be included on the Alumni Roster? ___ Yes ___ No

Receive the Update via E-Mail? _____ U.S. Mail? _____

LOS ANGELES UNIFIED SCHOOL DISTRICT