



**NOTICE OF ELECTION OF OFFICERS**  
(Please type or print clearly)

POST NAME: \_\_\_\_\_ POST NO. \_\_\_\_\_

ADDRESS: \_\_\_\_\_ EMAIL: \_\_\_\_\_

PHONE: ( ) \_\_\_\_\_ DUES: \$ \_\_\_\_\_ MEETING DAY(s): \_\_\_\_\_

MEETING PLACE (location): \_\_\_\_\_ TIME: \_\_\_\_\_

PLEASE INDICATE IF YOU HAVE A HALL THAT YOU RENT TO THE PUBLIC: ( ) YES ( ) NO

**ID NUMBER                      NAME                      HOME ADDRESS w/ZIP & EMAIL                      AREA-PHONE**

Commander			
Adjutant			
Senior Vice Commander			
Jr. Vice Commander			
Finance Officer			
Chaplain			
Historian			
Service Officer			
<del>State Fund Representative</del>			

\_\_\_\_\_  
Post Adjutant (outgoing)

\_\_\_\_\_  
Post Commander (outgoing)

**Send Department Mail to:**

( ) Post Address Above; OR ( ) Adjutant's Address Above; OR ( ) Commander's Address Above

**THIS LIST IS TO BE SUBMITTED TO DEPARTMENT ADJUTANT'S OFFICE  
IMMEDIATELY UPON ELECTION OF NEW OFFICERS.**

MAIL A COPY TO YOUR DISTRICT ADJUTANT

*If Officers are same we still need you to return this sheet COMPLETED for the record!*

**IMPORTANT - COMPLETE CERTIFICATION OF SERVICE ON BACK**

- OVER -

# CERTIFICATION OF SERVICE RECORD OF POST OFFICERS

Post No. \_\_\_\_\_

<b>Membership Card # &amp; Name</b>	<b>Date of Enlistment</b>	<b>Date of Discharge</b>	<b>Rank and Organization</b>	<b>Serial Number</b>
Commander				
Senior Vice Cmdr.				
Jr. Vice Cmdr.				
Adjutant				
Historian				
Finance Off.				
Service Off.				
Chaplain				
Judge Adv.				
Sgt. at Arms				

**I hereby certify that each of the above officials is eligible to membership in The American Legion and has the consequent right to serve in an official capacity.**

(Signed) \_\_\_\_\_  
(Post Adjutant)