

20 \_\_\_\_\_ - 20 \_\_\_\_\_

# POST OFFICERS CERTIFICATION FORM

POST No. \_\_\_\_\_  
 Do you own your Post? \_\_\_\_\_  
 Do You Operate a Bar? \_\_\_\_\_  
 Is your Post Incorporated? \_\_\_\_\_  
 Is your Post Bonded? \_\_\_\_\_

**NO CARBON REQUIRED**

**YELLOW COPY:** Retain for Post Files. **PINK COPY:** Send to District Adjutant.

**WHITE COPY:** Send to Department Headquarters. Mail to: The American Legion Department of IL PO Box 2910 Bloomington, IL 61702

**IMPORTANT NOTE:** This Certification Form **MUST** be Received by Department Headquarters before any new membership cards will be issued.

\_\_\_\_\_ Post No. \_\_\_\_\_ Dist. No. \_\_\_\_\_ Div. No. \_\_\_\_\_  
 (Name of Post as it appears on your Charter)

\_\_\_\_\_ (Name of City or Town) \_\_\_\_\_ (Post Address) \_\_\_\_\_ (Zip Code)

County: \_\_\_\_\_ Regulars Post Meeting Date: \_\_\_\_\_ Time: \_\_\_\_\_ Dues: \_\_\_\_\_

Email Address: \_\_\_\_\_ Post Phone No. \_\_\_\_\_  
 (Either Commander or Adjutant Only)

*(Article IX, Section 3, Department Constitution: NOTE: Each Post must elect its officers at a regular meeting, not less than (30) thirty days nor more than (60) sixty days prior to the Department Convention and report them together with the new Post Adjutant, whether elected or appointed, within (5) five days after said election to the Department Adjutant. Each Post may prescribe by its own by-laws the date upon which its officers shall enter upon their duties.) DO NOT INDICATE "PREVIOUSLY CERTIFIED" ON ANY OFFICER. FORMS SO INDICATED WILL BE RETURNED.*

OFFICER	NAME	I.D. #	PHONE #
COMMANDER			Home: Cell:
SR. VICE COMMANDER			Home: Cell:
JR. VICE COMMANDER			Home: Cell:
ADJUTANT			Home: Cell:
FINANCE OFFICER			Home: Cell:
SERVICE OFFICER			Home: Cell:
CHAPLAIN			Home: Cell:
SGT-AT-ARMS			Home: Cell:
JUDGE ADVOCATE			Home: Cell:
HISTORIAN			Home: Cell:

### CERTIFICATION OF SERVICE RECORD

OFFICER	NAME	DATE OF ENLISTMENT	DATE OF DISCHARGE	ORGANIZATION (Army, Navy, Etc.)	SERIAL NUMBER
COMMANDER					
SR. VICE COMMANDER					
JR. VICE COMMANDER					
ADJUTANT					
FINANCE OFFICER					

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

DATE: \_\_\_\_\_ 20 \_\_\_\_\_

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

Signed \_\_\_\_\_  
 (Outgoing Post Commander)