



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

# ILLINOIS AMERICAN LEGION RIDERS CHAPTER OFFICERS



\*\*\* MUST TYPE \*\*\*

\_\_\_\_ Post /Chapter No. \_\_\_\_ Div. \_\_\_\_ Dist. \_\_\_\_  
*(NAME OF POST AS IT APPEARS ON CHARTER)*

at \_\_\_\_  
*(NAME OF TOWN)* *(ADDRESS)* *(ZIP CODE)*

County \_\_\_\_ Regular Chapter Meeting Days \_\_\_\_ Time \_\_\_\_ Dues \_\_\_\_

Website Address \_\_\_\_  
*(IF APPLICABLE)*

(Article IX, Section 3, Department Constitution) Post/Chapter Phone Number ( \_\_\_\_ )

**NOTE:** Each Chapter must elect its officers at a regular meeting, each membership year and report them to The American Legion, Department of Illinois within five days after said election. Each Chapter may prescribe, by its own by-laws, the date upon which its officers shall enter upon their duties.

	NAME	Legion/Aux./S.A.L. I.D. NUMBER	PHONE #	EMAIL ADDRESS
DIRECTOR				
ASST. DIRECTOR				
SECRETARY				
TREASURER				
SGT.-AT-ARMS / RUN COORDINATOR				
HISTORIAN*				
MEMBERSHIP CHAIRMAN*				
CHAPLAIN*				

(\* These offices are at the discretion of the individual chapter)

### CERTIFICATION OF SERVICE RECORD

Pursuant to the action of the 13th Annual National Convention of The American Legion at Detroit, Michigan, September 24, 1931, I have examined the service record and/or eligibility of each of the officials who have been duly elected to serve for the ensuing year.

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

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

Signed \_\_\_\_ Signed \_\_\_\_  
*(Chapter Director)* *(Post Commander)*

**NO CARBON REQUIRED**  
**WHITE COPY—RETURN TO: AMERICAN LEGION RIDERS—DEPARTMENT OF ILLINOIS, P.O. BOX 2910, BLOOMINGTON, IL 61702**  
**YELLOW COPY— RETAIN: FOR POST/CHAPTER FILES**