

District Officer Roster

District:

Year:

Please complete and return your District Officers list and Committee Chairmen list. It is the duty of the Adjutant/Outgoing Adjutant to complete these forms. List must be completed, signed and returned.

Commander

Name:

Legion Member # Post #

Mailing Address (Street or PO Box):

City: State: Zip:

Phone: Area Code: Phone Number:

e-mail:

Vice Commander and D.E.C. Alternate

Name:

Legion Member # Post #

Mailing Address (Street or PO Box):

City: State: Zip:

Phone: Area Code: Phone Number:

e-mail:

Adjutant

Name:

Legion Member # Post #

Mailing Address (Street or PO Box):

City: State: Zip:

Phone: Area Code: Phone Number:

e-mail:

Finance Officer

Name:

Legion Member # Post #

Mailing Address (Street or PO Box):

City: State: Zip:

Phone: Area Code: Phone Number:

e-mail:

Judge Advocate

Name:

Legion Member # Post #

Mailing Address (Street or PO Box):

City: State: Zip:

Phone: Area Code: Phone Number:

e-mail:

Chaplain

Name:

Legion Member # Post #

Mailing Address (Street or PO Box):

City: State: Zip:

Phone: Area Code: Phone Number:

e-mail:

