

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. Lists must be completed, signed and returned.

Americanism Chairman

Legion Member# Post#

Mailing Address (Street or PO Box)

City State Zip

Area Code Phone Number

e-mail _____

Boy Scout Chairman

Legion Member# Post#

Mailing Address (Street or PO Box)

City State Zip

Area Code Phone Number

e-mail _____

Cadet Patrol Chairman

Legion Member# Post#

Mailing Address (Street or PO Box)

City State Zip

Area Code Phone Number

e-mail _____

Baseball Chairman

Legion Member # Post#

Mailing Address (Street or PO Box)

City State Zip

Area Code Phone Number

e-mail _____

Boys State Chairman

Legion Member# Post#

Mailing Address (Street or PO Box)

City State Zip

Area Code Phone Number

e-mail _____

Children And Youth Chairman

Legion Member# Post#

Mailing Address (Street or PO Box)

City State Zip

Area Code Phone Number

e-mail _____

Heroes to Hometowns

Homeless Veterans

Legion Member #	Post#
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Legion Member#	Post#
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Mailing Address (Street or PO Box)

Mailing Address (Street or PO Box)

City	State	Zip
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City	State	Zip
------	-------	-----

Area Code	Phone Number
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Area Code	Phone Number
-----------	--------------

email _____

email _____

Please double check address and phone numbers for accuracy.

OVER

County Government Chairman

Legion Member#	Post#	
Mailing Address (Street or PO Box)		
City	State	Zip
Area Code	Phone Number	
e-mail		

Membership Chairman

Legion Member#	Post#	
Mailing Address (Street or PO Box)		
City	State	Zip
Area Code	Phone Number	
e-mail		

National Security Chairman

Legion Member#	Post#	
Mailing Address (Street or PO Box)		
City	State	Zip
Area Code	Phone Number	
e-mail		

Publicity Chairman

Legion Member#	Post#	
Mailing Address (Street or PO Box)		
City	State	Zip
Area Code	Phone Number	
e-mail		

School Awards Chairman

Legion Member#	Post#	
Mailing Address (Street or PO Box)		
City	State	Zip
Area Code	Phone Number	
e-mail		

Legislative Chairman

Legion Member#	Post#	
Mailing Address (Street or PO Box)		
City	State	Zip
Area Code	Phone Number	
e-mail		

Membership Vice-Chairman

Legion Member#	Post#	
Mailing Address (Street or PO Box)		
City	State	Zip
Area Code	Phone Number	
e-mail		

Oratorical Chairman

Legion Member#	Post#	
Mailing Address (Street or PO Box)		
City	State	Zip
Area Code	Phone Number	
e-mail		

Veterans Affairs & Rehabilitation Chairman

Legion Member #	Post#	
Mailing Address (Street or PO Box)		
City	State	Zip
Area Code	Phone Number	
e-mail		

State Youth Government Chairman

Legion Member #	Post#	
Mailing Address (Street or PO Box)		
City	State	Zip
Area Code	Phone Number	
e-mail		

Signed _____ Date _____

