

| DISTRICT | AREA | CERTIFICATION OF ELIGIBILITY AMERICAN LEGION DISTRICT OFFICERS | | | | | |
|--------------------------------|------------|---|---------------------|--|-----------------|-------------------------|----------------|
| LEGION YEAR 2017 - 2018 | | <i>Upon election and/or appointment of Post Officers for Legion Year designated, complete this form and submit it by email. Complete ALL items.</i> | | | | DISTRICT EMAIL | |
| DISTRICT NAME * | | DISTRICT PHONE | DISTRICT PER_CAPITA | INCORPORATED YES <input type="checkbox"/> NO <input type="checkbox"/> | ELECTION DATE * | INSTALLATION DATE | |
| DISTRICT MAILING ADDRESS | | DISTRICT MEETING LOCATIONS (i.e. Post 2, 4, 6, 8) | | | | DISTRICT MEETINGS DATES | |
| OFFICERS | FIRST NAME | LAST NAME | MEMBERSHIP I.D. # | PERSONAL PHONE | STREET ADDRESS | CITY | E-MAIL ADDRESS |
| District Commander | * | | * | * | * | | * |
| 1st Vice Commander | * | | * | * | * | | * |
| 2nd Vice Commander | | | | | | | |
| 3rd Vice Commander | | | | | | | |
| Adjutant | * | | * | * | * | | * |
| Assistant Adjutant | | | | | | | |
| Finance Officer | * | | * | * | * | | * |
| Chaplain | * | | * | * | * | | * |
| Historian | | | | | | | |
| Judge Advocate | | | | | | | |
| Sgt-at-Arms | | | | | | | |
| Assistant Sgt-at-Arms | | | | | | | |
| Service Officer | | | | | | | |

I hereby certify that each of each of the above officers is eligible for membership in The American Legion and has the consequent right to service in such capacity in accordance with Article III, Section 2 Department By-Laws.

POST ADJUTANT

DATE

POST COMMANDER

DATE

or
Email to: forms@calegion.org