

1 copy to Department

1 copy to District

Post No. _____

Post Name _____

OFFICIAL FORM

POST COMMITTEE CHAIRMEN

Please type or print

<u>COMMITTEE</u>	<u>CHAIRMAN</u>	<u>ADDRESS, CITY & ZIP</u>	<u>E-MAIL & PHONE (w/Area)</u>
Americanism			
Baseball			
Oratorical			
American Legion Boys State			
Membership			
National Security			
Veterans Affairs & Rehabilitation			
Children & Youth			
Sons of The American Legion			

Post Adjutant

Post Commander

List only those committees that Post has functioning

Mail when Commander makes appointments