

District # _____ Certification of Service Records of American Legion Officers

Complete this form and return within seven (7) days following the District Election to the Department Adjutant

Officer	Name	Residential Address/City/Zip	POST	YEAR of Discharge	Member ID Number	Email Address
Commander						
Adjutant						
Senior Vice Commander						
Vice Commander						
Vice Commander						
Vice Commander						
Vice Commander						
Vice Commander						
Finance Officer						
Chaplain						
Historian						
Judge Advocate						
Service Officer						
Sergeant-at-Arms						
Pursuant to the action of the 13 th Annual National Convention of The American Legion in Detroit, September 4, 1931, I have examined the service record of each of the following Officials who have been duty elected to serve District _____ for the ensuing year.				I hereby certify that each of the above officials is eligible to membership in The American Legion and has the consequent right to serve in an official capacity. You must review a copy of each Officer's DD-214.		
			Date	Signed District Adjutant		