

DEPARTMENT COMMITTEE RECOMMENDATIONS CHAIRMEN & VICE CHAIRMEN

DISTRICT
NO.

2016-2017

This form is for your recommendations to the Department Commander for appointments of Department Committee Chairmen & Vice Chairmen. Your selections will be grouped with the other District Commanders, with the final appointments being made by the Department Commander after a committee consisting of the Department Commander, the three Department Vice Commanders and the Department Adjutant review your recommendations. The Department By-Laws will give you an insight on the duties of each committee.

All information requested on this form must be completed in its entirety, including full address with zip code and telephone number. Only qualified Legionnaires from your District should be recommended. It is not necessary to recommend a Legionnaire for each committee.

Please return to Department Headquarters ***no later than July 1, 2016*** for consideration.

(PLEASE PRINT LEGIBLY)

ACTIVITIES Chairman	NAME _____ POST NO. _____ ADDRESS _____ HOME PHONE _____
ACTIVITIES Vice Chairman	NAME _____ POST NO. _____ ADDRESS _____ HOME PHONE _____
AMERICANISM Chairman	NAME _____ POST NO. _____ ADDRESS _____ HOME PHONE _____
AMERICANISM Vice Chairman	NAME _____ POST NO. _____ ADDRESS _____ HOME PHONE _____
BLOOD DONOR Chairman	NAME _____ POST NO. _____ ADDRESS _____ HOME PHONE _____
BLOOD DONOR Vice Chairman	NAME _____ POST NO. _____ ADDRESS _____ HOME PHONE _____
CHILDREN & YOUTH Chairman	NAME _____ POST NO. _____ ADDRESS _____ HOME PHONE _____
CHILDREN & YOUTH Vice Chairman	NAME _____ POST NO. _____ ADDRESS _____ HOME PHONE _____
COMMUNITY SERVICE Chairman	NAME _____ POST NO. _____ ADDRESS _____ HOME PHONE _____
COMMUNITY SERVICE Vice Chairman	NAME _____ POST NO. _____ ADDRESS _____ HOME PHONE _____

CONVENTIN LIAISON Chairman	NAME _____ POST NO. _____ ADDRESS _____ HOME PHONE _____
CONVENTION LIAISON Vice Chairman	NAME _____ POST NO. _____ ADDRESS _____ HOME PHONE _____
EMBLEM & POPPY Chairman	NAME _____ POST NO. _____ ADDRESS _____ HOME PHONE _____
EMBLEM & POPPY Vice Chairman	NAME _____ POST NO. _____ ADDRESS _____ HOME PHONE _____
ESSAY Chairman	NAME _____ POST NO. _____ ADDRESS _____ HOME PHONE _____
ESSAY Vice Chairman	NAME _____ POST NO. _____ ADDRESS _____ HOME PHONE _____
FUNDRAISING Chairman	NAME _____ POST NO. _____ ADDRESS _____ HOME PHONE _____
FUNDRAISING Vice Chairman	NAME _____ POST NO. _____ ADDRESS _____ HOME PHONE _____
HOSPITAL ENTERTAINMENT Chairman	NAME _____ POST NO. _____ ADDRESS _____ HOME PHONE _____
HOSPITAL ENTERTAINMENT Vice Chairman	NAME _____ POST NO. _____ ADDRESS _____ HOME PHONE _____
INTERNAL ORGANIZATION Chairman	NAME _____ POST NO. _____ ADDRESS _____ HOME PHONE _____
INTERNAL ORGANIZATION Vice Chairman	NAME _____ POST NO. _____ ADDRESS _____ HOME PHONE _____
JUNIOR SHOOTING Chairman	NAME _____ POST NO. _____ ADDRESS _____ HOME PHONE _____
JUNIOR SHOOTING Vice Chairman	NAME _____ POST NO. _____ ADDRESS _____ HOME PHONE _____
KEYSTONE BOYS STATE Chairman	NAME _____ POST NO. _____ ADDRESS _____ HOME PHONE _____

KEYSTONE BOYS STATE Vice Chairman	NAME_____POST NO._____ ADDRESS_____ _____ HOME PHONE_____
LAW & ORDER Chairman	NAME_____POST NO._____ ADDRESS_____ _____ HOME PHONE_____
LAW & ORDER Vice Chairman	NAME_____POST NO._____ ADDRESS_____ _____ HOME PHONE_____
LEGION COLLEGE Chairman	NAME_____POST NO._____ ADDRESS_____ _____ HOME PHONE_____
LEGION COLLEGE Vice Chairman	NAME_____POST NO._____ ADDRESS_____ _____ HOME PHONE_____
LEGISLATIVE Chairman	NAME_____POST NO._____ ADDRESS_____ _____ HOME PHONE_____
LEGISLATIVE Vice Chairman	NAME_____POST NO._____ ADDRESS_____ _____ HOME PHONE_____
MEMBERSHIP Chairman	NAME_____POST NO._____ ADDRESS_____ _____ HOME PHONE_____
MEMBERSHIP Vice Chairman	NAME_____POST NO._____ ADDRESS_____ _____ HOME PHONE_____
NATIONAL CEMETERY Chairman	NAME_____POST NO._____ ADDRESS_____ _____ HOME PHONE_____
NATIONAL CEMETERY Vice Chairman	NAME_____POST NO._____ ADDRESS_____ _____ HOME PHONE_____
NATIONAL SECURITY Chairman	NAME_____POST NO._____ ADDRESS_____ _____ HOME PHONE_____
NATIONAL SECURITY Vice Chairman	NAME_____POST NO._____ ADDRESS_____ _____ HOME PHONE_____
NEW POST/POST HOME Chairman	NAME_____POST NO._____ ADDRESS_____ _____ HOME PHONE_____
NEW POST/POST HOME Vice Chairman	NAME_____POST NO._____ ADDRESS_____ _____ HOME PHONE_____

ORATORICAL Chairman	NAME_____POST NO._____ ADDRESS_____ _____ HOME PHONE_____
ORATORICAL Vice Chairman	NAME_____POST NO._____ ADDRESS_____ _____ HOME PHONE_____
POW/MIA Chairman	NAME_____POST NO._____ ADDRESS_____ _____ HOME PHONE_____
POW/MIA Vice Chairman	NAME_____POST NO._____ ADDRESS_____ _____ HOME PHONE_____
PUBLIC RELATIONS Chairman	NAME_____POST NO._____ ADDRESS_____ _____ HOME PHONE_____
PUBLIC RELATIONS Vice Chairman	NAME_____POST NO._____ ADDRESS_____ _____ HOME PHONE_____
RELIGIOUS EMPHASIS Chairman	NAME_____POST NO._____ ADDRESS_____ _____ HOME PHONE_____
RELIGIOUS EMPHASIS Vice Chairman	NAME_____POST NO._____ ADDRESS_____ _____ HOME PHONE_____
RESOLUTION EXECUTIVE Chairman	NAME_____POST NO._____ ADDRESS_____ _____ HOME PHONE_____
RESOLUTION EXECUTIVE Vice Chairman	NAME_____POST NO._____ ADDRESS_____ _____ HOME PHONE_____
SCHOLARSHIP ENDOWMENT Chairman	NAME_____POST NO._____ ADDRESS_____ _____ HOME PHONE_____
SCHOLARSHIP ENDOWMENT Vice Chairman	NAME_____POST NO._____ ADDRESS_____ _____ HOME PHONE_____
SCOUTING Chairman	NAME_____POST NO._____ ADDRESS_____ _____ HOME PHONE_____
SCOUTNG Vice Chairman	NAME_____POST NO._____ ADDRESS_____ _____ HOME PHONE_____
SONS OF THE LEGION Chairman	NAME_____POST NO._____ ADDRESS_____ _____ HOME PHONE_____

SONS OF THE LEGION Vice Chairman	NAME_____POST NO._____ ADDRESS_____ _____ HOME PHONE_____
VETERANS AFFAIRS/REHAB Chairman	NAME_____POST NO._____ ADDRESS_____ _____ HOME PHONE_____
VETERANS AFFAIRS/REHAB Vice Chairman	NAME_____POST NO._____ ADDRESS_____ _____ HOME PHONE_____
STATE VETERANS CENTER Chairman <i>(specify VAMC)</i>	NAME_____POST NO._____ ADDRESS_____ _____ HOME PHONE_____
STATE VETERANS CENTER Vice Chairman <i>(specify VAMC)</i>	NAME_____POST NO._____ ADDRESS_____ _____ HOME PHONE_____

SIGNATURE_____DATE_____

(District Commander)

DOUBLE CHECK your information, making sure that ALL names are spelled correctly and complete address information (including zip code) is given. Your cooperation is appreciated.

Send the completed forms no later than **July 1, 2016** to:

The American Legion
ATTN: RICHELLE
PO Box 2324
Harrisburg, PA 17105-2324