

**DEPARTMENT COMMITTEE RECOMMENDATIONS
CHAIRMEN & VICE CHAIRMEN**

DISTRICT NO.

2015-2016

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, 2015* 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 _____

<p align="center">CONVENTIN LIAISON Chairman</p>	NAME _____ POST NO. _____ ADDRESS _____ HOME PHONE _____
<p align="center">CONVENTION LIAISON Vice Chairman</p>	NAME _____ POST NO. _____ ADDRESS _____ HOME PHONE _____
<p align="center">EMBLEM & POPPY Chairman</p>	NAME _____ POST NO. _____ ADDRESS _____ HOME PHONE _____
<p align="center">EMBLEM & POPPY Vice Chairman</p>	NAME _____ POST NO. _____ ADDRESS _____ HOME PHONE _____
<p align="center">ESSAY Chairman</p>	NAME _____ POST NO. _____ ADDRESS _____ HOME PHONE _____
<p align="center">ESSAY Vice Chairman</p>	NAME _____ POST NO. _____ ADDRESS _____ HOME PHONE _____
<p align="center">FUNDRAISING Chairman</p>	NAME _____ POST NO. _____ ADDRESS _____ HOME PHONE _____
<p align="center">FUNDRAISING Vice Chairman</p>	NAME _____ POST NO. _____ ADDRESS _____ HOME PHONE _____
<p align="center">HOSPITAL ENTERTAINMENT Chairman</p>	NAME _____ POST NO. _____ ADDRESS _____ HOME PHONE _____
<p align="center">HOSPITAL ENTERTAINMENT Vice Chairman</p>	NAME _____ POST NO. _____ ADDRESS _____ HOME PHONE _____
<p align="center">INTERNAL ORGANIZATION Chairman</p>	NAME _____ POST NO. _____ ADDRESS _____ HOME PHONE _____
<p align="center">INTERNAL ORGANIZATION Vice Chairman</p>	NAME _____ POST NO. _____ ADDRESS _____ HOME PHONE _____
<p align="center">JUNIOR SHOOTING Chairman</p>	NAME _____ POST NO. _____ ADDRESS _____ HOME PHONE _____
<p align="center">JUNIOR SHOOTING Vice Chairman</p>	NAME _____ POST NO. _____ ADDRESS _____ HOME PHONE _____
<p align="center">KEYSTONE BOYS STATE Chairman</p>	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 _____
SCOUTING 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, 2015* to:

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