

DISTRICT CHAIRMEN APPOINTMENTS

2016-2017

DISTRICT NO. _____

(PLEASE PRINT LEGIBLY)

ACTIVITIES	NAME _____ POST NO. _____ ADDRESS _____ HOME PHONE _____ MEMBER ID NO. _____
AMERICANISM	NAME _____ POST NO. _____ ADDRESS _____ HOME PHONE _____ MEMBER ID NO. _____
CHILDREN & YOUTH	NAME _____ POST NO. _____ ADDRESS _____ HOME PHONE _____ MEMBER ID NO. _____
COMMUNITY SERVICE	NAME _____ POST NO. _____ ADDRESS _____ HOME PHONE _____ MEMBER ID NO. _____
EMBLEM & POPPY	NAME _____ POST NO. _____ ADDRESS _____ HOME PHONE _____ MEMBER ID NO. _____
ESSAY	NAME _____ POST NO. _____ ADDRESS _____ HOME PHONE _____ MEMBER ID NO. _____
FUNDRAISING	NAME _____ POST NO. _____ ADDRESS _____ HOME PHONE _____ MEMBER ID NO. _____
HOSPITAL ENTERTAINMENT	NAME _____ POST NO. _____ ADDRESS _____ HOME PHONE _____ MEMBER ID NO. _____
KEYSTONE BOYS STATE	NAME _____ POST NO. _____ ADDRESS _____ HOME PHONE _____ MEMBER ID NO. _____
LAW & ORDER	NAME _____ POST NO. _____ ADDRESS _____ HOME PHONE _____ MEMBER ID NO. _____
LEGION COLLEGE	NAME _____ POST NO. _____ ADDRESS _____ HOME PHONE _____ MEMBER ID NO. _____

LEGISLATIVE	NAME _____ POST NO. _____ ADDRESS _____ _____ HOME PHONE _____ MEMBER ID NO. _____
MEMBERSHIP	NAME _____ POST NO. _____ ADDRESS _____ _____ HOME PHONE _____ MEMBER ID NO. _____
NATIONAL SECURITY	NAME _____ POST NO. _____ ADDRESS _____ _____ HOME PHONE _____ MEMBER ID NO. _____
NEW POST/POST HOME	NAME _____ POST NO. _____ ADDRESS _____ _____ HOME PHONE _____ MEMBER ID NO. _____
ORATORICAL	NAME _____ POST NO. _____ ADDRESS _____ _____ HOME PHONE _____ MEMBER ID NO. _____
POW/MIA	NAME _____ POST NO. _____ ADDRESS _____ _____ HOME PHONE _____ MEMBER ID NO. _____
PUBLIC RELATIONS	NAME _____ POST NO. _____ ADDRESS _____ _____ HOME PHONE _____ MEMBER ID NO. _____
SCHOLARSHIP ENDOWMENT	NAME _____ POST NO. _____ ADDRESS _____ _____ HOME PHONE _____ MEMBER ID NO. _____
SCOUTING	NAME _____ POST NO. _____ ADDRESS _____ _____ HOME PHONE _____ MEMBER ID NO. _____
SONS OF THE LEGION	NAME _____ POST NO. _____ ADDRESS _____ _____ HOME PHONE _____ MEMBER ID NO. _____
VETERANS AFFAIRS & REHABILITATION	NAME _____ POST NO. _____ ADDRESS _____ _____ HOME PHONE _____ MEMBER ID NO. _____
HOUSING FOR HOMELESS VETERANS CORP.	NAME _____ POST NO. _____ ADDRESS _____ _____ HOME PHONE _____ MEMBER ID NO. _____

SIGNATURE_____DATE_____
(District Commander)

Please keep in mind that these appointments are for DISTRICT CHAIRMEN. Make sure that whomever you appoint will accept the responsibility this appointment carries with it. This will mean a more successful program for your District.

DOUBLE CHECK your information, making sure that ALL names are spelled correctly and complete address information (including zip code) is given, along with the member's ID number. 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**