

Pennsylvania Department of the American Legion

Veteran Assistance Referral Form

Do you know a Veteran Who needs help?

USE: The Veteran Assistance Referral Form is used by American Legion Members to seek help and assistance from a Department Service Officer. If you know a veteran or family member who needs assistance or may have questions pertaining to veterans benefits simply fax or mail this form to the Department Headquarters and we'll do the rest. The person being referred does not have to be an American Legion member.

Your Name:

Your Post#

Person who we should contact:

Street Address of Person we should contact:

City:

Phone Number:

Zip:

Best Time to contact?

Email: (If available)

If the person does not have a phone number, what other means could we use to contact?

What assistance does this person need?

Mail form to:
The American Legion
Department of Pennsylvania
P.O. Box 2324
Harrisburg, PA 17105-2324

Fax to:
717-975-2836
Or Simply call our toll free Headquarters Help
Desk
877-720-8387

Office use only: