

**DEPARTMENT OFFICER RECOMMENDATIONS**  
2019-2020

DISTRICT NO. \_\_\_\_\_

**NOTE: THIS FORM MUST BE RETURNED TO HEADQUARTERS NO LATER THAN, JULY 1, 2019!**

(Recommend only Legionnaires from YOUR DISTRICT)

<b>JUDGE ADVOCATE</b>	NAME _____ POST NO. _____ ADDRESS _____ PHONE _____ BRANCH OF SERVICE _____ EMAIL _____
<b>PARLIAMENTARIAN</b>	NAME _____ POST NO. _____ ADDRESS _____ PHONE _____ BRANCH OF SERVICE _____ EMAIL _____
<b>HISTORIAN</b>	NAME _____ POST NO. _____ ADDRESS _____ PHONE _____ BRANCH OF SERVICE _____ EMAIL _____
<b>SERGEANT-AT-ARMS</b>	NAME _____ POST NO. _____ ADDRESS _____ PHONE _____ BRANCH OF SERVICE _____ EMAIL _____
<b>ASSISTANT SERGEANT-AT-ARMS (only one recommendation per District)</b>	NAME _____ POST NO. _____ ADDRESS _____ PHONE _____ BRANCH OF SERVICE _____ EMAIL _____

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
(District Commander)