

**TRANSMIT TO DEPARTMENT HEADQUARTERS PRIOR TO ANNUAL DEPARTMENT
CONVENTION**

PLEASE TYPE OR PRINT CLEARLY

Mail To: The American Legion
7465 E 1st Ave. D.
Denver, CO 80230

Legion Year _____

ALL POSTS MAILING WILL BE MAILED TO ADJUTANT

ALL MEMBERSHIP MAILING WILL BE MAILED TO THE MEMBERSHIP DIRECTOR

Adjutant: _____ Member ID# _____

Address: _____ City: _____ Zip: _____

Commander: _____ Member ID# _____

Address: _____ City: _____ Zip: _____

Finance: _____ Member ID# _____

Address: _____ City: _____ Zip: _____

Membership: _____ Member ID# _____

Address: _____ City: _____ Zip: _____

Sr. Vice Commander: _____ Member ID# _____

Address: _____ City: _____ Zip: _____

Jr. Vice Commander: _____ Member ID# _____

Address: _____ City: _____ Zip: _____

Jr. Vice Commander: _____ Member ID# _____

Address: _____ City: _____ Zip: _____

Post Service Officer: _____ Member ID# _____

Address: _____ City: _____ Zip: _____

CERTIFIED BY: _____ **(POST ADJUTANT/COMMANDER)**