

THIS FORM MUST BE TYPED

# RESOLUTION

**Department of Virginia, Inc.  
The American Legion  
Ninety-Ninth Annual Convention  
Herndon, Virginia  
July 13-16, 2017**

Resolution No.: \_\_\_\_\_ Subject: \_\_\_\_\_

Referred to Convention Committee on : \_\_\_\_\_

PLEASE DO NOT FILL IN ABOVE THIS LINE

USE CONTINUATION SHEET IF NECESSARY

<b>FOR CONVENTION COMMITTEE USE</b>	
Approved_____	Rejected_____
Approved with Amendments_____	
_____	
Consolidated with_____	
_____	
Referred to Standing Committee_____	
_____	
Received and Recorded_____	
Other Action_____	
Signature_____	
(Chairman)	

This is to certify that the above resolution was adopted by our (CIRCLE ONE) Post/District Convention but with the indicated Department Action substituted for local resolving clause.

\_\_\_\_\_  
Signature Post/District Adjutant

Post No. \_\_\_\_\_ District No. \_\_\_\_\_

If submitted by Department Standing Committee or Special Committee fill in below.

\_\_\_\_\_  
Signature Chairman or Secretary Committee

SEE INSTRUCTIONS ON REVERSE SIDE  
(PAGE \_\_\_ OF \_\_\_ PAGE)

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