

**POST CERTIFICATION OF OFFICERS FORM 2021-2022**

POST NUMBER # \_\_\_\_\_

DISTRICT NUMBER \_\_\_\_\_

CHARTER NAME \_\_\_\_\_

Date \_\_ / \_\_ / \_\_

DUES \$ \_\_\_\_\_

**COMPLETE AND ACCURATE INFORMATION IS NEEDED FOR COMPILING OUR MAILING LIST AND THE DEPARTMENT'S DIRECTORY OF OFFICERS.**

**POST COMMANDER:**

\_\_\_\_\_  
(FIRST) (MIDDLE) (LAST) (SPOUSE)

Address: \_\_\_\_\_  
STREET CITY ZIP

MEMBERSHIP # \_\_\_\_\_ Email: \_\_\_\_\_

Phone Number: \_\_\_\_-\_\_\_\_-\_\_\_\_

**\*POST ADJUTANT:**

\_\_\_\_\_  
(FIRST) (MIDDLE) (LAST) (SPOUSE)

Address: \_\_\_\_\_  
STREET CITY ZIP

MEMBERSHIP # \_\_\_\_\_ Email: \_\_\_\_\_

Phone Number: \_\_\_\_-\_\_\_\_-\_\_\_\_

**POST FINANCE OFFICER:**

\_\_\_\_\_  
(FIRST) (MIDDLE) (LAST) (SPOUSE)

Address: \_\_\_\_\_  
STREET CITY ZIP

MEMBERSHIP # \_\_\_\_\_ Email: \_\_\_\_\_

Phone Number: \_\_\_\_-\_\_\_\_-\_\_\_\_

(over)

**POST SERVICE OFFICER:**

\_\_\_\_\_  
(FIRST) (MIDDLE) (LAST) (SPOUSE)

Address: \_\_\_\_\_  
STREET CITY ZIP

MEMBERSHIP # \_\_\_\_\_ Email: \_\_\_\_\_

Phone Number: \_\_\_\_ - \_\_\_\_ - \_\_\_\_

**POST MEMBERSHIP CHAIRMAN:**

\_\_\_\_\_  
(FIRST) (MIDDLE) (LAST)

Address: \_\_\_\_\_  
STREET CITY ZIP

MEMBERSHIP # \_\_\_\_\_ Email: \_\_\_\_\_

Phone Number: \_\_\_\_ - \_\_\_\_ - \_\_\_\_

Location of Meetings: \_\_\_\_\_

Post Phone: ( ) \_\_\_\_\_ - \_\_\_\_\_ Post e-mail address: \_\_\_\_\_

Mailing address of Post: \_\_\_\_\_

Meetings held on: \_\_\_\_\_ : \_\_\_\_\_ AM/PM  
(Please indicate Day of Week and Month) (Time)

**WHEN COMPLETE MAIL FORM TO:**

**THE AMERICAN LEGION  
ATTN: ERICA ECCLESTON  
1708 COMMONWEALTH AVENUE  
RICHMOND VA 23230**

**AS SOON AS POSSIBLE – PLEASE...NO LATER THAN JUNE 25th.**

**\*All information from Department Headquarters goes to the Post Adjutant unless otherwise noted: \_\_\_\_\_**