

2024 - 2025 MEMBERSHIP YEAR	ANNUAL POST INFORMATION AND POST OFFICERS FORM	POST NO.	DIST. NO.	ZONE NO.
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IMPORTANT NOTE: *The 2025 membership cards will be sent to your Post Adjutant unless otherwise notified to Department HQ*

POST INFORMATION ONLY:

NAME OF POST AS IT APPEARS ON YOUR CHARTER: _____

POST ADDRESS: _____

POST CITY: _____ POST ST: _____ POST ZIP: _____

POST EMAIL ADDRESS: _____ POST PHONE NO.: _____

POST MEETING LOCATION: _____ POST MTG. DATE: _____
POST MTG. TIME: _____

DOES YOUR POST HAVE THE FOLLOWING: *(Check all that are applicable)* PROPERTY / LAND AUXILIARY
 BAR / LOUNGE HANDICAP ACCESSIBLE HONOR GUARD SQUADRON LEGION RIDERS

POST OFFICER INFORMATION

The below Post Officers are certified to hold the positions and in good standing for 2024-2025 membership year

<u>OFFICER</u>	<u>NAME</u>	<u>MEMBERSHIP ID#</u>	<u>PHONE # ON FIRST LINE</u> <u>EMAIL ADDRESS ON SECOND LINE</u>
<i>COMMANDER</i>	First: _____ Last: _____	ID# _____	Phone # _____ Email Address _____
<i>ADJUTANT</i>	Fisrt: _____ Last: _____	ID# _____	Phone # _____ Email Address _____
<i>FINANCE</i>	First: _____ Last: _____	ID# _____	Phone # _____ Email Address _____
<i>SERVICE OFFICER</i>	First: _____ Last: _____	ID# _____	Phone # _____ Email Address _____

I attest that the above officers are paid for the membership year and have verified their eligibility for the American Legion.

Signature of Post Adjutant

Date

To submit Form electronically, Download this form to your device, complete all fields and then click "Submit" below.