

# POST OFFICERS REPORTING FORM

Please fill out and submit to: Wisconsin American Legion – P.O Box 388, Portage, WI 53901 or by email to: [membership@wilegion.org](mailto:membership@wilegion.org).

**\*\*\*Unless another date is entered in "Date Installed", the effective date will be July 1st.**

*NOTE:* Please submit even if there are no changes, just indicate so on the form in the ‘No CHG’ column.

District: \_\_\_\_\_ Post No.: \_\_\_\_\_ Date Elected: \_\_\_\_\_ Date Installed: \_\_\_\_\_

TITLE	NAME	Member ID #	PHONE	EMAIL	No CHG
Commander					<input type="checkbox"/>
Membership Chairman					<input type="checkbox"/>
Vice Commander					<input type="checkbox"/>
Vice Commander					<input type="checkbox"/>
Vice Commander					<input type="checkbox"/>
Adjutant					<input type="checkbox"/>
Finance Officer					<input type="checkbox"/>
Historian					<input type="checkbox"/>
Chaplain					<input type="checkbox"/>
Sergeant at Arms					<input type="checkbox"/>
Sergeant at Arms					<input type="checkbox"/>
Service Officer					<input type="checkbox"/>
Judge Advocate					<input type="checkbox"/>

Fillable form also available at [wilegion.org](http://wilegion.org). Under ‘Membership’ tab and then ‘Membership Forms & Info’.