## DEPARTMENT OF ILLINOIS MARINE CORPS LEAGUE AWARDS

From: Department Officer/Distr	rict Commandant/Det	achment Comn	nandant
(Sta	ate your name and Fu	ıll Title)	
Γο: State Commandant			
(Name and Title, if any)	recommend		for the
(Name and Title, if any)		(Recipient's Na	ame)
following award			based upon
(Be s	pecific on Award Ty	pe)	
he reason(s) specified below:			
( ) 1			
A			
Attach additional justification if	necessary.		
(Signature)		_	(Date)
( )			,
(Detachment Name)	(Detachment	Number)	(District)