THE AMERICAN LEGION NATIONAL HEADQUARTERS

 **Notific a tio n o f P ost/S quadr o n C ommander s & A djutan t s**

Department of Post No. Date

# POST COMMANDER

Enter Member ID #

Incumbent

Newly Elected/Appointed

Name

Phone

Cell

Home

Work

Email

# POST ADJUTANT

Enter Member ID #

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Name

Phone

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Home

Work

Email

***(Complete this section if Post has an SAL Squadron.)***

# SQUADRON COMMANDER

Enter Member ID #

Incumbent

Newly Elected/Appointed

Name

Phone

Cell

Home

Work

Email

# SQUADRON ADJUTANT

Enter Member ID #

Incumbent

Newly Elected/Appointed

Name

Phone

Cell

Home

Work

Email

# SIGNATURE OF POST ADJUTANT