YEARLY COUNTY OFFICERS REPORTING FORM

All Counties are to submit to Department Headquarters a *yearly* County Officer Reporting Form. Please check the box verifying that have seen each officer's DD-214 form you each year following their annual County Elections. "DD-214 Verification is needed to verify eligibility for the Legion" Note: Please fill out form completely and check the information with all officers beforehand to ensure a correct submission. Member IDs are required. Sign and submit complete forms to the Wisconsin American Legion P.O. Box 388, Portage, WI 53901or save and email to membership@wilegion.org. Forms are also available at wilegion.org.

District:_____County:_____Date Elected:_____Date Installed_____

TITLE	NAME & ID#	ADDRESS	PHONE & EMAIL	DD-214 VERIFIED
Commander				☐
Membership Chairman				☐
Ist Vice Commander				☐
2nd Vice Commander				☐
Vice Commander				☐
Adjutant				☐
Finance Officer				☐
Historian				☐
Chaplain				☐
Sergeant-At-Arms				☐
Sergeant-At-Arms				☐
Service Officer				☐
Judge Advocate				☐

I hereby certify that each of the above officials are eligible for membership in the American Legion and that their current year membership dues have been paid, and they have the consequent right to serve in an official capacity. Pursuant to the Department Constitution, I have examined the service record of each of the following officers who have been duly elected to serve: _____(County)

SIGN HERE ***County Adjutant Signature Required***: _____ ***Date:*** _____

*****(Form will be returned if unsigned) *****