YEARLY DISTRICT OFFICERS REPORTING FORM

All Districts are to submit to Department Headquarters a *yearly* District Officer Reporting Form. Please check the box verifying that you have seen each officer's DD-214 form each year following their annual District 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 PO Box 388, Portage, WI 53901 or save and email to membership@wilegion.org. Forms are also available at wilegion.org.

District:_____ Date Elected: _____ Date Installed:_____

TITLE	NAME & MEMBER ID	HOME ADDRESS	PHONE	EMAIL	DD-214 VERIFIED
Commander					☐
Membership Chairman					☐
1st Vice Commander					☐
2nd Vice Commander					☐
3rd 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 yearly 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 _____(District).

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

(Form will be returned if unsigned) *

DISTRICT COMMITTEE CHAIRMAN FORM

District No: _____ Date Elected: _____ Date Installed: _____

TITLE	NAME	ADDRESS	PHONE NUMBER	EMAIL ADDRESS
Americanism				
Athletic Officer				
Badger Boys State				
Boy Scouts				
Oratorical				
Shooting Sports				
Blood Donor				
Camp American Legion				
Children & Youth				
Legion Riders				
Legislative				
Publicity/Newsletter				
POW/MIA				
Public Relations				
Sons of the American Legion				
VA&R				