

The American Legion Department of Indiana
POST COMMITTEE CHAIRPERSONS
Membership Year: 2020-2021

Date Submitted: _____

Certified correct by: _____

District #: _____ Post #: _____

Current Commander Signature

Current Adjutant Signature

A.L. Riders

ID #: _____

Name: _____

A & G

ID #: _____

Name: _____

ALF Scholarship

ID #: _____

Name: _____

Baseball

ID #: _____

Name: _____

Bowling

ID #: _____

Name: _____

Boy Scouts

ID #: _____

Name: _____

Boys State

ID #: _____

Name: _____

Children & Youth

ID #: _____

Name: _____

Children's Ed. & Welfare

ID #: _____

Name: _____

Community Involvement

ID #: _____

Name: _____

Fire Fighter/ EMS/Law & Order

ID #: _____

Name: _____

Flag Etiquette

ID #: _____

Name: _____

Girl Scouts

ID #: _____

Name: _____

Golf

ID #: _____

Name: _____

Homeless Veterans

ID #: _____

Name: _____

Jr. Shooting Sports

ID #: _____

Name: _____

Lafayette Home

ID #: _____

Name: _____

Legislative

ID #: _____

Name: _____

Nursing Home

ID #: _____

Name: _____

Oratorical/School Award

ID #: _____

Name: _____

POW/MIA

ID #: _____

Name: _____

Public Relations

ID #: _____

Name: _____

Publications Editor

ID #: _____

Name: _____

JROTC

ID #: _____

Name: _____

Youth Cadet Law Enforcement

ID #: _____

Name: _____