

CERTIFICATION FORM

POST & DISTRICT REVITALIZATION RECOGNITION LETTER

These letters are awarded to the revitalized post and those individuals who assisted in the revitalization effort.

TO: The American Legion
Attn: Membership Division
P.O. Box 1055
Indianapolis, IN 46206

Date _____

The Department of _____ requests a “welcome back” letter for Post _____.

Name of individual(s) who assisted in the revitalization of this post:

Department adjutant

Department

Letters will be sent directly to the department for presentation at an appropriate ceremony.

DUPLICATE THIS FORM AS NECESSARY