|  |  |  |
| --- | --- | --- |
|  **CHAPTER** |  **AREA(1,2,3,4,5 or 6)** | **CERTIFICATION OF SERVICE RECORD OF AMERICAN LEGION RIDERS CHAPTER OFFICERS****DEPARTMENT OF CALIFORNIA** |
|  |  |
| **CHAPTER YEAR 2025-2026** | **THIS FORM IS TO BE USED BY A PROPOSED NEW CHAPTER ONLY. This form will not be accepted for yearly Certification of Officers. The yearly forms generate from the online roster.** | **CHAPTER FACEBOOK/WEBSITE ADDRESSES** |
| **CHAPTER PHYSICAL ADDRESS** | **POST PHONE NUMBER** | **CHAPTER YEARLY DUES** **$** | **Charter date** | **OFFICER ELECTION DATE**  | **INSTALLATION DATE**  |
| **CHAPTER MAILING ADDRESS**:  | **ADDRESS OF REGULAR MEETINGS if different from physical address.** | **MEETING DAY & TIME** **EXAMPLE: 3RD WEDNESDAY AT 6PM** |
| **OFFICERS**  | **NAME PRINT ONLY AND LEGIBLY** | **MEMBERSHIP I.D.** **(9 DIGITS)** | **TELEPHONE NO.** **(Show area code)** | **LEGION** | **AUXILIARY** | **SQUADRON** |
| **Director**  |  |  |  |  |  |  |
| **Vice Director** |  |  |  |  |  |  |
| **Secretary** |  |  |  |  |  |  |
| **Treasurer** |  |  |  |  |  |  |
| **Sgt. At Arms** |  |  |  |  |  |  |
| **Chaplain** |  |  |  |  |  |  |
| **Historian** |  |  |  |  |  |  |
| **Road Captain** |  |  |  |  |  |  |
| **Judge Advocate** |  |  |  |  |  |  |
| **Membership** |  |  |  |  |  |  |



I hereby certify that each of the above officers is eligible for membership in The American Legion Riders and has the consequent

right to service in such capacity in accordance with Article V, Section 3 of the Department Bylaws.

**(Chapter Director) (Chapter Secretary)**

ONE COPY TO: **Department Secretary** ONE COPY TO: **Area Vice Director** ONE COPY: **Chapter Files**