THE AMERICAN LEGION - DEPARTMENT OF OHIO
POST CHAIRMAN CERTIFICATION FORM

To provide better service to those Post Members, the Department requests each Post to please ***complete this Chairman Certification and return to Department Headquarters, attention programs***. ***If emailing this form to Department HQ after completion, send to:*** **forms@ohiolegion.com** Failure to return this form every year will result in mailings being sent to the wrong person. A new mailing list is created each year. Information is **NOT** carried over from a previous year.

2026-2027 POST PROGRAM CHAIRMAN

AMERICANISM CHAIRMAN (including A & G Test)

Name:_____ ID#: _____

Address:_____

City: _____ State: _____ Zip:_____

Phone #: _____ E-Mail: _____

BUCKEYE BOYS STATE CHAIRMAN

Name:_____ ID#: _____

Address:_____

City: _____ State: _____ Zip:_____

Phone #: _____ E-Mail: _____

CHILDREN AND YOUTH CHAIRMAN

Name:_____ ID#: _____

Address:_____

City: _____ State: _____ Zip:_____

Phone #: _____ E-Mail: _____

VA&R CHAIRMAN

Name:_____ ID#: _____

Address:_____

City: _____ State: _____ Zip:_____

Phone #: _____ E-Mail: _____

NATIONAL SECURITY CHAIRMAN

Name:_____ ID#: _____

Address:_____

City: _____ State: _____ Zip:_____

Phone #: _____ E-Mail: _____

GIFTS FOR YANKS CHAIRMAN

Name:_____ ID#: _____

Address:_____

City: _____ State: _____ Zip:_____

Phone #: _____ E-Mail: _____

LEGISLATIVE CHAIRMAN

Name:_____ ID#: _____

Address:_____

City: _____ State: _____ Zip:_____

Phone #: _____ E-Mail: _____

MEDIA, MARKETING & COMMUNICATIONS CHAIRMAN

Name:_____ ID#: _____

Address:_____

City: _____ State: _____ Zip:_____

Phone #: _____ E-Mail: _____

AMERICAN LEGION RIDERS CHAIRMAN

Name:_____ ID#: _____

Address:_____

City: _____ State: _____ Zip:_____

Phone #: _____ E-Mail: _____

_____ **POST:** _____

POST ADJUTANT

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