

THE SONS OF THE AMERICAN LEGION

CERTIFICATION OF SQUADRON OFFICERS FOR 2021/2022

Elected/Appointed at a meeting of Squadron _____, convened at
_____, Arkansas; on _____, 20__

COMMANDER: _____ Phone () _____

Address: _____

1ST VICE-COMMANDER: _____ Phone () _____

Address: _____

2ND VICE-COMMANDER: _____ Phone () _____

Address: _____

ADJUTANT: _____ Phone () _____

Address: _____

FINANCE OFFICER: _____ Phone () _____

Address: _____

CHAPLAIN: _____ Phone () _____

Address: _____

SGT-AT-ARMS: _____ Phone () _____

Address: _____

HISTORIAN: _____ Phone () _____

Address: _____

SQUADRON ADVISOR: _____ Phone () _____

Address: _____

SQUADRON MEETINGS: Date: _____ Place: _____

Mail to: The American Legion, Department of Arkansas, P.O. Box 3280, Little Rock, AR 72203