

**THE AMERICAN LEGION
DEPARTMENT OF TEXAS**

I, _____, as presiding officer of the _____ Division Convention held at _____, Texas on _____, 20____, certify that the following were duly elected by said Convention in accordance with provisions of the Department Constitution and By-Laws.

DIVISION COMMANDER

Name Address City Zip Code
Res. _____ / _____ Cell _____ / _____ Post # _____
Phone # Phone #
SSN: _____ - _____ - _____ Fax _____ / _____
Email _____

Cap Size _____ First new cap, for incoming District and Division Commanders only, will be presented at the Department Convention (free of charge) (Cap size is needed as soon as possible.)

DIVISION ADJUTANT (If one is elected or appointed)

Name Address City Zip
Res. _____ / _____ Cell _____ / _____ Post # _____
Email _____

DELEGATE TO NATIONAL CONVENTION

Name Membership ID#

ALTERNATE DELEGATE TO NATIONAL CONVENTION

Name Membership ID #

ATTEST:

Presiding Officer

Convention Officer

(To be completed and mailed to Department Headquarters, PO Box 140527, Austin, TX 78714 without delay.)