## THE AMERICAN LEGION DEPARTMENT OF TEXAS

## POST ORATORICAL CHAIRMAN CERTIFICATION FORM

## MUST BE COMPLETED BY POST ADJUTANT

Date

American Legion Post	, located in		hereby, certifies the
following individual as Post Am	nerican Legion Oratorical Cha	nirman:	
Name:		ID#:	
Address:			
City:		ST TX	Zip:
РН:		Email:	
All American Legion Oratorica	l are mailed in August. <u>Posts</u>	that certify their Orat	orical Chairman will
receive this extra packet. All o	other Posts will receive only the	he standard Post Oratori	cal Mailing.
Post Commander / Adjut	ant		