VFW
VETERANS OF FOREIGN WARS

20 _18_ - _19_ POST ELECTION REPORT

DATE OF ELECTION:

POST #	DISTRICT #	DEPARTMENT	POST NAME	POST DUES AMOUNT Includes National and Department Per Capita	$

POST MEETING LOCATION (PHYSICAL ADDRESS)	POST MAILING ADDRESS
BUILDING NAME (IF NOT POST NAME)	STREET ADDRESS or PO BOX #
STREET ADDRESS	ADDRESS LINE 2

CITY	STATE	ZIP CODE	CITY	STATE	ZIP CODE

POST E-MAIL ADDRESS	POST MEETING DAY/TIME

POST WEBSITE

POST PHONE #   FEDERAL EMPLOYER INDENTIFICATION # (EIN)

CHECK ALL THAT APPLY:

☐ OWN   ☐ RENT   ☐ NO POST HOME   ☐ CANTEEN/CLUBROOM
☐ PROVIDE HALL RENTALS   ☐ PROVIDE MILITARY FUNERAL HONORS

COMMANDER

MEMBERSHIP #	NAME	STREET ADDRESS or PO BOX #
PHONE #	EMAIL ADDRESS	CITY	STATE	ZIP CODE

SENIOR VICE COMMANDER

MEMBERSHIP #	NAME	STREET ADDRESS or PO BOX #
PHONE #	EMAIL ADDRESS	CITY	STATE	ZIP CODE

JUNIOR VICE COMMANDER

MEMBERSHIP #	NAME	STREET ADDRESS or PO BOX #
PHONE #	EMAIL ADDRESS	CITY	STATE	ZIP CODE

QUARTERMASTER

MEMBERSHIP #	NAME	STREET ADDRESS or PO BOX #
PHONE #	EMAIL ADDRESS	CITY	STATE	ZIP CODE

CHAPLAIN

MEMBERSHIP #	NAME	STREET ADDRESS or PO BOX #
PHONE #	EMAIL ADDRESS	CITY	STATE	ZIP CODE

JUDGE ADVOCATE (APPOINTED)

MEMBERSHIP #	NAME	STREET ADDRESS or PO BOX #
PHONE #	EMAIL ADDRESS	CITY	STATE	ZIP CODE

SURGEON (APPOINTED)

MEMBERSHIP #	NAME	STREET ADDRESS or PO BOX #
PHONE #	EMAIL ADDRESS	CITY	STATE	ZIP CODE

1 YEAR TRUSTEE

MEMBERSHIP #	NAME	STREET ADDRESS or PO BOX #
PHONE #	EMAIL ADDRESS	CITY	STATE	ZIP CODE

2 YEAR TRUSTEE

MEMBERSHIP #	NAME	STREET ADDRESS or PO BOX #
PHONE #	EMAIL ADDRESS	CITY	STATE	ZIP CODE

3 YEAR TRUSTEE

MEMBERSHIP #	NAME	STREET ADDRESS or PO BOX #
PHONE #	EMAIL ADDRESS	CITY	STATE	ZIP CODE

ADJUTANT (APPOINTED)

MEMBERSHIP #	NAME	STREET ADDRESS or PO BOX #
PHONE #	EMAIL ADDRESS	CITY	STATE	ZIP CODE

SERVICE OFFICER (APPOINTED)

MEMBERSHIP #	NAME	STREET ADDRESS or PO BOX #
PHONE #	EMAIL ADDRESS	CITY	STATE	ZIP CODE