



2011-12 POST ELECTION REPORT

DATE OF ELECTION:

POST #	DISTRICT #	DEPARTMENT	POST NAME	POST DUES AMOUNT Includes National and Department Per Capita	\$
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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	
POST PHONE # ()		POST MEETING DAY		CHECK ALL THAT APPLY:			
FEDERAL EMPLOYER IDENTIFICATION # (EIN)		POST MEETING TIME		<input type="checkbox"/> OWN <input type="checkbox"/> RENT <input type="checkbox"/> NO POST HOME <input type="checkbox"/> CANTEEN/CLUBROOM <input type="checkbox"/> PROVIDE HALL RENTALS <input type="checkbox"/> 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					
MEMBERSHIP #		NAME		STREET ADDRESS or PO BOX #	
PHONE # ()		EMAIL ADDRESS		CITY	
				STATE	
				ZIP CODE	

SURGEON					
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	