

DISTRICT # _____

_____ ALTERNATES

It is hereby certified that the following Legionnaires were recommended for election as **ALTERNATES** from the Department of Iowa to the National Convention at a regularly convened conference of the above District.

| | <u>Member's Name</u> | <u>Post #</u> | <u>Phone Number</u> | <u>Email Address</u> |
|-----|----------------------|---------------|---------------------|----------------------|
| 1. | _____ | _____ | _____ | _____ |
| 2. | _____ | _____ | _____ | _____ |
| 3. | _____ | _____ | _____ | _____ |
| 4. | _____ | _____ | _____ | _____ |
| 5. | _____ | _____ | _____ | _____ |
| 6. | _____ | _____ | _____ | _____ |
| 7. | _____ | _____ | _____ | _____ |
| 8. | _____ | _____ | _____ | _____ |
| 9. | _____ | _____ | _____ | _____ |
| 10. | _____ | _____ | _____ | _____ |

**Mail to: The American Legion of Iowa
720 Lyon Street
Des Moines, IA 50309**

Signed by District Commander or Adjutant