

THE AMERICAN LEGION

DEPARTMENT OF CALIFORNIA

117 VETERANS WAR MEMORIAL BLDG, SAN FRANCISCO, CA 94102-4587

THIS FORM MUST BE FILLED OUT IN **TRIPLICATE**

Resolution No. _____ Subject _____

(DO NOT FILL IN ABOVE THIS LINE)

RESOLUTION

Below space is not for use when resolution originates with a
adopted.
Dept Committee/Commission or Convention Committee.

This is to certify that the above resolution was

Chairman

Dept Committee/Commission or Convention Committee

DATE:

DATE: