

**_____ District
Officer Report
2018-2019**

**Due immediately upon completion of
District Spring Conference**

Page 1 of 2

District Commander

Name _____
Address _____
City, State, Zip _____
Daytime Phone _____
Evening Phone _____
Email Address _____

District Vice Commander

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Evening Phone _____
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District Adjutant

Name _____
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District Finance Officer

Name _____
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District Chaplain

Name _____
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Page 2 of 2

District Sergeant-at-Arms

Name _____
Address _____
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District Historian

Name _____
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City, State, Zip _____
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District Judge Advocate

Name _____
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Mail to:

The American Legion of Iowa
Marcia Hoch, Executive Secretary
720 Lyon Street
Des Moines, IA 50309