



NASSAU COUNTY AMERICAN LEGION
DIRECTORY INFORMATION



POST NAME _____ NO _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

TELEPHONE _____ MEETING DAY/ EVENINGS _____

LOCATION OF MEETINGS _____

POST COMMANDER _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

TELEPHONE _____

ADJUTANT _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

TELEPHONE _____

COUNTY REP _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

TELEPHONE _____

ALT COUNTY REP _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

TELEPHONE _____

ADJUTANTS SIGNATURE _____ DATE _____

PLEASE TYPE OR PRINT NEATLY
SEND TO DIRECTORY CHAIRMAN



NASSAU COUNTY AMERICAN LEGION
DIRECTORY INFORMATION



POST NAME _____ NO _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

TELEPHONE _____ MEETING DAY/ EVENINGS _____

LOCATION OF MEETINGS _____

POST COMMANDER _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

TELEPHONE _____

ADJUTANT _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

TELEPHONE _____

COUNTY REP _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

TELEPHONE _____

ALT COUNTY REP _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

TELEPHONE _____

ADJUTANTS SIGNATURE _____ DATE _____

PLEASE TYPE OR PRINT NEATLY
POST ADJUTANTS COPY