



**VETERANS OF FOREIGN WARS OF THE UNITED STATES  
NATIONAL HEADQUARTERS**  
406 WEST 34TH STREET KANSAS CITY, MISSOURI 64111



**REPORT OF INSTITUTION**  
**POST NO. \_\_\_\_\_**

Date of Institution: \_\_\_\_\_ Annual Dues Amt. \$ \_\_\_\_\_

Post Name: \_\_\_\_\_ Location: \_\_\_\_\_

Meeting Place: \_\_\_\_\_  
(STREET ADDRESS) (CITY) (STATE) (ZIP CODE)

Regular Meeting Night(s): \_\_\_\_\_ Time: \_\_\_\_\_

Number of members of the new Post present at the time of Institution (not less than 10) \_\_\_\_\_

The following officers were elected:

Commander: \_\_\_\_\_

NAME EMAIL ADDRESS AND/OR PHONE NUMBER

Sr. Vice Commander: \_\_\_\_\_

NAME EMAIL ADDRESS AND/OR PHONE NUMBER

Jr. Vice Commander: \_\_\_\_\_

NAME EMAIL ADDRESS AND/OR PHONE NUMBER

Quartermaster: \_\_\_\_\_

NAME EMAIL ADDRESS AND/OR PHONE NUMBER

1 Year Trustee: \_\_\_\_\_

NAME EMAIL ADDRESS AND/OR PHONE NUMBER

2 Year Trustee: \_\_\_\_\_

NAME EMAIL ADDRESS AND/OR PHONE NUMBER

3 Year Trustee: \_\_\_\_\_

NAME EMAIL ADDRESS AND/OR PHONE NUMBER

In addition, the following officers were appointed:

Adjutant: \_\_\_\_\_

NAME EMAIL ADDRESS AND/OR PHONE NUMBER

Chaplain: \_\_\_\_\_

NAME EMAIL ADDRESS AND/OR PHONE NUMBER

Judge Advocate: \_\_\_\_\_

NAME EMAIL ADDRESS AND/OR PHONE NUMBER

Surgeon: \_\_\_\_\_

NAME EMAIL ADDRESS AND/OR PHONE NUMBER

Officer of the Day: \_\_\_\_\_

NAME EMAIL ADDRESS AND/OR PHONE NUMBER

Service Officer: \_\_\_\_\_

NAME EMAIL ADDRESS AND/OR PHONE NUMBER

Guard: \_\_\_\_\_

NAME EMAIL ADDRESS AND/OR PHONE NUMBER

I hereby report that the above named Post was instituted this date, and the officers, as reported hereon, were installed in office in accordance with the Bylaws and Ritual of the Veterans of Foreign Wars of the United States.

I certify that proof of eligibility has been verified according to the Congressional Charter and Bylaws.

Instituting Officer: \_\_\_\_\_  
PRINTED NAME SIGNATURE TITLE DATE

This form shall be filled out in duplicate and immediately forwarded directly to the Department Adjutant. Any officer not present for institution shall be marked X.

DEPARTMENT ADJUTANT- After review of this institution report, promptly send original copy to the Adjutant General, Veterans of Foreign Wars of the United States, 406 West 34<sup>th</sup> St., Kansas City, MO 64111.