



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



CERTIFICATION OF CONSOLIDATION OF POSTS

Date: _____

To: The Commander-in-Chief

Through: Commander, Department of _____

In conformity with Section 209, National Bylaws, certification is hereby made through the channels, for the consolidation of:

_____, VFW Post No. _____, _____, _____
POST NAME CHARTER CITY STATE

with

_____, VFW Post No. _____, _____, _____
POST NAME CHARTER CITY STATE

To be known as:

_____, VFW Post No. _____, _____, _____
POST NAME CHARTER CITY STATE

The following officers were elected:

Commander: _____

NAME

MEMBERSHIP NUMBER

Senior Vice Commander: _____

NAME

MEMBERSHIP NUMBER

Junior Vice Commander: _____

NAME

MEMBERSHIP NUMBER

Quartermaster: _____

NAME

MEMBERSHIP NUMBER

Chaplain: _____

NAME

MEMBERSHIP NUMBER

1 Year Trustee: _____

NAME

MEMBERSHIP NUMBER

2 Year Trustee: _____

NAME

MEMBERSHIP NUMBER

3 Year Trustee: _____

NAME

MEMBERSHIP NUMBER

In addition, the following officers were appointed and/or elected:

Adjutant: _____

NAME

MEMBERSHIP NUMBER

Judge Advocate: _____

NAME

MEMBERSHIP NUMBER

Surgeon: _____

NAME

MEMBERSHIP NUMBER

Service Officer: _____

NAME

MEMBERSHIP NUMBER

I hereby attest by my signature that written notice was sent to all members of the Posts involved at least fourteen (14) days in advance of the joint meeting conducted on the above date, that all actions, with exception of the election and appointment of officers, were approved by a two-thirds (2/3) vote of the members present and voting at the stated meeting, that proof of eligibility has been verified and the elected and appointed officers have been duly installed.

Department Representative: _____
PRINTED NAME SIGNATURE DATE

Department Acknowledgement: _____
DEPARTMENT COMMANDER/ADJUTANT PRINTED NAME SIGNATURE DATE