

**Certification Form**  
**New Post Development Pin**

**This recognition, in the form of a specially designed cap/lapel pin, is for any individual who assists in starting a new post.**

**These individuals may be nominated at any time once the temporary charter has been submitted**

Send to: Department Headquarters  
Attn: Membership  
PO Box 547859  
Orlando FL 32854-7859

Fax: 407/299-0901 Attn: Irene  
Email: [igraham@floridalegion.org](mailto:igraham@floridalegion.org)

Date \_\_\_\_\_

The Department of Florida requests New Post Development Pins” for the following individual(s) for assisting in the development of Post \_\_\_\_\_.

Name of individuals(s) who assisted in starting this new post.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Department Adjutant

\_\_\_\_\_  
Post or District Officer (signature)

\_\_\_\_\_  
Department

\_\_\_\_\_  
Date

\_\_\_\_\_  
Officers’ Title

**Duplicate as Necessary**