

# DISTRICT COMMANDER POST VISITATION REPORT

(Please note: you are required to visit each post in your district at least once a year)

Name: \_\_\_\_\_ Date: \_\_\_\_\_ Post: \_\_\_\_\_ District: \_\_\_\_\_  
Explain Reason for Visit: \_\_\_\_\_

## MEMBERSHIP AND POST ACTIVITIES

How many members last year: \_\_\_\_\_ How many current members: \_\_\_\_\_  
Number of new members this year: \_\_\_\_\_ Active membership committee: *Yes/No*  
Number of new members installed annually: \_\_\_\_\_ Lapel pins given: *Yes/No*  
Officers elected annually: *Yes/No* All offices filled: *Yes/No* Officers installed annually: *Yes/No*  
Meetings held regularly: *Yes/No* (Dates when meetings are held) \_\_\_\_\_  
Meetings run according to National Post Officer's Guide: *Yes/No* # of SAL Squadron members: \_\_\_\_\_  
# of Auxiliary Members: \_\_\_\_\_ # of Legion Rider Members: \_\_\_\_\_  
Post is asset to community: *Yes/No* (Explain) \_\_\_\_\_  
List family activities: \_\_\_\_\_  
List programs which aid Veterans: \_\_\_\_\_  
List community activities post is used for: \_\_\_\_\_  
Has qualified Service Officer: *Yes/No* Name & Date of certified: \_\_\_\_\_  
Uses Post Officers Guide: *Yes/No* Uses Post Administrative Manual: *Yes/No*  
Date of *Legion Link* Posted on Bulletin Board: \_\_\_\_\_  
Has Liability Insurance: *Yes/No* Is National Headquarters listed as additionally insured: *Yes/No*  
Is Department Headquarters listed as additional insured: *Yes/No*  
Post Incorporated Status Active: *Yes/No* (verify on [www.sunbiz.org](http://www.sunbiz.org))  
IRS Form 990 Filed Annually: *Yes/No* (What year is the last 990's filed) \_\_\_\_\_  
Dept approval date of Constitution & By-Laws posted: \_\_\_\_\_ Posted on Bulletin Board: *Yes/No*

### ***Please attach a copy of the following documents upon submission of your report:***

*Constitution & By Laws      Sales Tax Certification      Florida Incorporation Annual Report Filing*  
*Liability Insurance Declaration Page      Previous Year's 990's filed with IRS*

## PROGRAMS

Post has chairman and participates in the following programs: (*Yes or No*)  
Americanism: \_\_\_\_\_ Boys State: \_\_\_\_\_ Boy Scouts: \_\_\_\_\_ Legion Baseball: \_\_\_\_\_  
Oratorical: \_\_\_\_\_ School Medals: \_\_\_\_\_ Shooting Sports: \_\_\_\_\_ Children & Youth: \_\_\_\_\_  
Special Olympics: \_\_\_\_\_ ROTC: \_\_\_\_\_ Law & Order: \_\_\_\_\_ Blood Donor: \_\_\_\_\_  
Membership: \_\_\_\_\_ Disaster preparedness: \_\_\_\_\_ VA & R: \_\_\_\_\_  
Vet Employment: \_\_\_\_\_ VA Hospital: \_\_\_\_\_ Legion Riders: \_\_\_\_\_  
*Please attach improvement plans for programs not being utilized.*

## COMMUNITY SERVICE & ACTIVITIES

Post involved in: (*Yes or No*) Flag Day: \_\_\_\_\_ Veterans Day: \_\_\_\_\_ Memorial Day: \_\_\_\_\_ July 4<sup>th</sup>: \_\_\_\_\_  
Get Out the Vote: \_\_\_\_\_ Legion Birthday: \_\_\_\_\_ Four Chaplains Sunday: \_\_\_\_\_  
American Education Week: \_\_\_\_\_ Community Service Projects: \_\_\_\_\_ Educational Scholarships: \_\_\_\_\_  
Post has Color Guard: \_\_\_\_\_ Post participates in Burial Services for Veterans: \_\_\_\_\_

*If you have any questions or concerns, please attach them to this form.*

Verify: Post Commander \_\_\_\_\_ Date \_\_\_\_\_  
District Commander \_\_\_\_\_ Date \_\_\_\_\_