2023-2024 Certification Form Gold Brigade Sixth Consecutive Year Award



Date:

Mail to:	Department of Florida PO Box 547859 Orlando, FL 32854	Fax: Email	mambarahin@flaridalagian ara		
KEEP A COPY FOR YOUR RECORDS					
	ring member of the Department of gade" Award for enrolling 50 or mo				
This award		cruiter" Legion cap, alc	ong with a Gold Brigade plaque, cap		
Attach a list of new members (use the form on next page to list members)					
Crown T	Γype: □ Regular □ Fort Knox	☐ Women's Crown	Lining: □ Lined □ Unlined		
Cap Size: Mandatory Insignia: Yes Orange					
Name			Phone#()		
Post#	Post City	Years qu	alifying for Gold Brigade		
Number of new members enrolled (minimum 50)					
Departme	ent Adjutant Signature	Post Adjut	tant Signature		
Date		Date			
DO NOT WRITE BELOW THIS LINE – FOR DEPARTMENT USE ONLY					
	Date Received	Date Shipped _			

MAIL TO BE RECEIVED AT DEPARTMENT ON OR BEFORE MAY 8, 2024

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1	26	51
2	27	52
3	28	53
4	29	54
5	30	55
6	31	56
7	32	57
8	33	58
9	34	59
10	35	60
11	36	61
12	37	62
13	38	63
14	39	64
15	40	65
16	41	66
17	42	67
18	43	68
19	44	69
20	45	70
21	46	71
22	47	72
23	48	73
24	49	74
25	50	75