

**CERTIFICATION FORM
ONE YEAR POST LEGION RIDER HISTORY BOOK**

INSTRUCTIONS: COMPLETE THIS FORM AND ATTACH SECURELY TO EACH ENTRY SUBMITTED WITH A "SPRING TYPE" BINDER CLIP. DO NOT PASTE IN ENTRY.

THIS ENTRY IS A ONE YEAR POST LEGION RIDER HISTORY BOOK

THIS ENTRY HAS _____ VOLUME(S) FOR THE CONTEST INDICATED ABOVE

Post Name/number: _____

Street address: _____

City: _____ State: _____ Zip code: _____

Telephone: - area code + number _____

Name of compiler: _____ title: _____

Street address: _____

City: _____ State: _____ Zip code: _____

Telephone - area code + number _____

A BOOK ENTERED IN THE WRONG CATEGORY WILL BE DISQUALIFIED.
MAKE SURE YOU ARE USING THE CORRECT FORM.

Name of Department historian: _____

Street address: _____

City: _____ State: _____ Zip code: _____

Telephone (area code + number) _____

Date certified: _____