

CERTIFICATION FORM

NATIONAL ONE-YEAR POST NARRATIVE CONTEST

INSTRUCTIONS: COMPLETE THIS FORM AND ATTACH SECURELY TO THE ENTRY SUBMITTED WITH A "SPRING TYPE"
BINDER CLIP. **DO NOT PASTE IN ENTRY. PLEASE DO NOT USE PO BOX FOR ADDRESS.**

THIS IS A ONE-YEAR: **POST NARRATIVE**

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

POST NAME AND NUMBER: _____

STREET ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

NAME OF POST HISTORIAN: _____

STREET ADDRESS: _____

_____ TEL: _____

NAME OF COMPILER IF DIFFERENT FROM HISTORIAN: _____

STREET ADDRESS: _____

_____ TEL: _____

EMAIL: _____

DEPARTMENT CERTIFICATION

THE DEPARTMENT OF _____ CERTIFIES THAT THIS NARRATIVE IS AN ENTRY FOR THE CONTEST
BEING CONDUCTED BY THE NATIONAL HISTORIAN THIS YEAR AT NATIONAL HEADQUARTERS.

DEPARTMENT HISTORIAN: _____ DATE CERTIFIED: _____

NO NARRATIVE WILL BE CONSIDERED BY THE CONTEST JUDGES UNLESS THE ENTRY IS ACCOMPANIED BY THIS
NATIONAL CONTEST CERTIFICATION FORM AND COMPLETED. **A BOOK ENTERED IN THE WRONG CATEGORY WILL BE
DISQUALIFIED. DEADLINE FOR ENTRY AT NATIONAL IS SEPTEMBER 15.**

NATIONAL HISTORIAN
NATIONAL HEADQUARTERS
THE AMERICAN LEGION
700 PENNSYLVANIA STREET
INDIANAPOLIS, INDIANA 46204