



INSTRUCTIONS (Read carefully)

1. The Unit President or other person designated by the Unit to receive the charter when issued must sign the certificate at the bottom of application on preceding page.
2. Charter applications must be printed or typed in triplicate, each bearing the names of the applicants eligible for membership. All three copies will be forwarded to the Department Headquarters, after signed by the Commander and the Adjutant of the Post to which the Unit is to be attached. The original will be retained by the Department Headquarters, and the other by the National Headquarters.
3. Each copy of the charter application must bear THE SIGNATURES called for in the FIRST AND SECOND ENDORSEMENTS below.
4. The application for charter and the following must be forwarded to Department Headquarters.
  - a. Individual Membership Applications, signed by a Post Officer. (A minimum of 10 new Senior members is required.)
  - b. Department and National membership dues for all names on the charter application (except transferring members who have already paid current year dues.)
  - c. Charter fee in amount designated by the Department.
  - d. Department and National copies of membership card stubs for names appearing on the charter application.
  - e. Unit Data Form.

**FIRST ENDORSEMENT**

Date \_\_\_\_\_, 20 \_\_\_\_\_

To the Department:

The foregoing application has been approved by \_\_\_\_\_ Post, Number \_\_\_\_\_,

of The American Legion, Department of \_\_\_\_\_, to which the Auxiliary Unit is to be attached.

Attest:

\_\_\_\_\_  
(Signature of Post Adjutant)

\_\_\_\_\_  
(Signature of Post Commander)

**SECOND ENDORSEMENT**

Date \_\_\_\_\_, 20 \_\_\_\_\_

Department \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_

I certify that I have examined the foregoing application. Approval is recommended. Charter is to be issued under the name of the American Legion Auxiliary Unit of \_\_\_\_\_ Post Number \_\_\_\_\_,  
(Location of Unit)  
of the American Legion Department of \_\_\_\_\_.

\_\_\_\_\_  
(Signature of Department President)

Return to: American Legion Auxiliary  
National Headquarters  
3450 Founders Rd.  
Indianapolis, IN 46268

**THIRD ENDORSEMENT**

Date \_\_\_\_\_, 20 \_\_\_\_\_

To the President,

The American Legion Auxiliary, Department of \_\_\_\_\_.

Returned. Approved. Charter issued and enclosed herewith.

\_\_\_\_\_  
(Signature of National Secretary)

**FOURTH ENDORSEMENT**

Date \_\_\_\_\_, 20 \_\_\_\_\_

To \_\_\_\_\_  
(Name of President of Auxiliary Unit)

Forwarded. Charter applied for herewith enclosed.

Department of \_\_\_\_\_

\_\_\_\_\_  
(Signature of Department President)