

All State Application

_____ Commander's Hat Size (male/female) – specify Life Member and Post number

_____ Quartermaster's Hat Size (male/female) - specify Life Member and Post number

All donations must have been made through the Department of Michigan.

If you have any disagreements with the program reports, you must contact the Director of the program to clear up the mistake.

Any disagreements with any Post donation, you must contact Department Headquarters.

Commander's Name: _____

Quartermaster's Name: _____

Post Name: _____ Post # _____

District # _____

Post Address: _____

City: _____ State: MI Zip: _____

Mail to:

Veterans of Foreign Wars

Department of Michigan

924 North Washington

Lansing, Michigan 48906