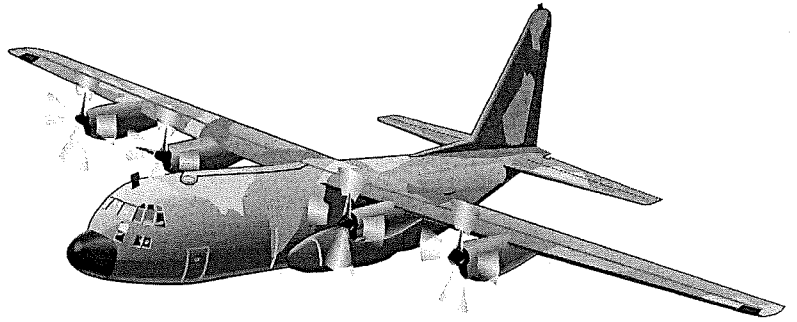


DATE: _____
MEMO TO: DEPARTMENT HQ'S
FROM: POST # _____
SUBJECT: "AIM HIGH STOP THE SLIDE" GET 10!
CUT-OFF DATE: May 11th 2018



I certify that the following Legionnaire _____ of Post _____, recruited at least 10 RENEWALS by the cut-off date. Please include the member ID number for new members.

SIGNATURE OF CERTIFYING OFFICIAL

RENEWAL MEMBER NAME

MEMBER NEW ID NUMBER

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

**CERTIFICATION FORM MUST BE RECEIVED AT DEPARTMENT HEADQUARTERS NO LATER THAN
MAY 11, 2018.**