

TAL CO Post Charter Cancellation

Action Items

POST#: _____ POST NAME: _____ DATE: _____

- ▶ Call for post meeting. Mail, email, phone members of the post and inform them of a call to meeting and the purpose is post charter cancellation. The district will make the notification.

Date Completed: _____

- ▶ The District Commander of the post in their district and his/her officers will be in attendance and conduct the meeting.

The District Commander will review the membership numbers over the past five years.

Mylegion.org will be reviewed for the number of members in 1982 post at large.

Discuss revitalization efforts for the post.

Discuss post officer opportunities.

Review the finances of the post.

Review the assets of the post.

Review the liabilities of the post.

Review the steps required to cancel the posts charter.

Date Completed: _____

- ▶ The minutes of the meeting must reflect the will of the membership of the post. The results of the membership vote must be recorded and forwarded to your District Commander and The American Legion Department of Colorado

Date Completed: _____

- ▶ Are there posts in the area the closing post can join? Can they consolidate with a neighboring post?

Date Completed: _____

- ▶ Does the post have an Honor/Color Guard? Do they understand that this will also be disbanded?

Date Completed: _____

- ▶ Does the post have a Sons of The American Legion Squadron? Has the commander of the sons been informed of the posts charter cancellation? Have the sons begun their process to turn in their charter and complete the business of the squadron?

Date Completed: _____

- ▶ Is there a high school in the city the post has supported over the years? Has the post informed the high school it will no longer support the activities or programs of The American Legion?

List the programs the post has supported; _____

Date Completed: _____

- ▶ Are there other programs the post has supported for the community and Veterans. Has the post informed the affected agencies they will no longer support such events?

List the programs the post has supported; _____

Date Completed: _____

- ▶ Are there other options the post can accomplish to save the post charter?
 - If there is a building, would the sale of the building help in reviving the post?
 - Is there an American Legion program the post can get involved in and support to revive the post?
 - Are there restructuring efforts of the post that could help revive the post?
 - Would a change of meeting place help revive the post?

Date Completed: _____

- ▶ Have all efforts been made to find the posts membership a new post home or transferred into the post at large 1982?

Date Completed: _____

Department Vice and District Commanders recommendations.

We recommend the following actions based upon our research and efforts to save Post _____

- Revitalize and reorganize the post.
- Charter a new post for the area or community.
- Merge existing membership with a newly chartered post.
- Cancel the post charter after all the business of the post has been completed and forward the required documents to The American Legion Department of Colorado Executive Committee for approval and forwarded onto The American Legion National Headquarters Executive Committee for final approval.

Signed this date: _____

Department Vice Commander

District Commander

The American Legion Department of Colorado have received Post _____ Charter and colors and have reviewed the documents provided by the post and district. With all the business of Post _____ been completed, The American Legion Department of Colorado Executive Committee concur with the recommendations of the Department Vice and District Commanders. The American Legion Executive Committee voted on this date: _____ and by the authority of the TALCO-DEC give approval for Post _____ charter cancellation and recommend forwarding the request to The American Legion National Headquarters National Executive Committee for final approval.

We certify that the actions have been completed:

ATTESTED this date: - _____

Department Commander

Department Adjutant

The American Legion Department of Colorado

Department Post Revitalization Checklist

Date Started:

Post # Post Name

Post Address

Post Phone #

Post email

Post Officers

Phone Numbers

email

	<i>Phone Numbers</i>	<i>email</i>
Post Commander		
Post Adjutant		
Post Finance Officer		
Post Vice Commander		
Post Vice Commander		
Post Vice Commander		
Membership Director		
Chaplain		
Sgt At Arms		
Executive Board Member		
Executive Board Member		
Executive Board Member		

Place an * next to an officer who is also a member of the Executive Board.

Membership

Current Members

Members overdue

Suspended Post Members

1982 Members Current

Notes

1982 Members Overdue					
# Suspended 1982 Members					
All Time High Membership					
Total Post Membership	1	2	3	4	5
Past Five (5) Years					

<u>Charter Information</u>	Date	Cancel Date
Temporary Post Charter		
Permanent Post Charter		
Date of Incorporation		

Membership Notification

<u>Mail/Email</u>	Date C/W
Current Post Membership	
Current 1982AD Membership	
Current 1982MN Membership	
Suspended Membership	
Membership overdue past 3yrs	
Phone Follow-up Call	

Notes

Results

Number 1982AD Transfers	
Number 1982MN Transfers	
Suspended Members renewed	
Overdue Members Renewed	

Notes

Elections

	Date
Scheduled	
Results	
TALMN Notified of New Officers	



THE AMERICAN LEGION POST CHARTER CANCELLATION FORM

Pursuant to NEC Resolution No. 27 adopted by the National Executive Committee in regular meeting assembled in Indianapolis, Indiana, on May 4-5, 1983, this approved form must be completed by Departments and submitted to the National Executive Committee when requesting Post Charter cancellation. Action will be taken on the request for Post Charter cancellation at the next regular scheduled meeting of the National Executive Committee.

By action of the Department Executive Committee of The American Legion, Department of , request is hereby submitted to cancel the Post Charter of the below listed American Legion Charter of the below listed American Legion Post.

Post Name: Post Number:

Post Location: Squadron: YES OR NO

Highest Membership Ever Recorded

Total Post Membership For The Last Five (5) Years:

<u>YEAR</u>	<u>MEMBERSHIP</u>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

NOTE Please leave fields blank if unknown

Temporary Charter Date:
(select date from drop-down menu by clicking inside box)

Date Format
mm/dd/yyyy

Permanent Charter Date:
(select date from drop-down menu by clicking inside box)

Date Format
mm/dd/yyyy

Supplemental Charter Date:
(select date from drop-down menu by clicking inside box)

Date Format
mm/dd/yyyy

Reason Post Charter Cancellation is Requested:

THIS IS TO CERTIFY THAT THE ABOVE ACTION WAS TAKEN BY OUR DEPARTMENT EXECUTIVE COMMITTEE

DEPARTMENT ADJUTANT OR COMMANDER:
(PRINTED NAME)

DEPARTMENT ADJUTANT OR COMMANDER:
(SIGNATURE)

DATE:
(select date from drop-down menu by clicking inside box)

Date Format
mm/dd/yyyy

NOTE: Final approval will be determined by The American Legion National Executive Committee. All post cancellation requests must be submitted through the Department American Legion state office. Any forms received directly at National Headquarters will be forwarded to the Department state office for authorization and endorsement.

**** THE POST CHARTER CANCELLATION CHECK LIST IS REQUIRED WITH THIS FORM ****

DUPLICATE THIS FORM AS NECESSARY



Department:

Post #:

THE AMERICAN LEGION POST CHARTER CANCELLATION CHECK LIST

(One Check List per Post is required to be completed / submitted)

Area and District Post Development/Revitalization Teams are requested to take the following steps prior to forwarding a request to the DEC for a Post Charter cancellation. Please submit the completed form to:

Steps / Actions: *(not in any particular or chronological order)*

Note: Please provide information regarding the questions, actions, or comments in the space provided. If additional space is necessary please attach the required information to this form.

1. Determine the veteran population in the community and surrounding area of the Post.

2. Contact the remaining members and Post Officers to determine if the Post is receptive of new membership and leadership mentoring.

3. Contact Department Headquarters for a list of active and expired Headquarters Post members in the zip code of the proposed Post Charter cancellation. Use these names for contacts for membership.

4. Does the Post hold scheduled monthly meetings? If not, when was the last meeting held and what was the purpose of the meeting?

5. Determine if the Posts' Membership is aware of the request for charter cancellation.

6. Determine programs and services the Post might provide for the community and the veterans of the community.

7. Is there a school, county seat, prison, or veteran's center in the area? If yes, what programs and services has the Post provided for them? If none, was there a time when the Post did provide activities and services? Please explain:

8. Is the communities population growing or declining? How so?

Three empty rectangular boxes for text entry.

9. Has the Post been made aware of the help they can receive from the Post Development/Revitalization Team?

Three empty rectangular boxes for text entry.

10. Has the Post Development/Revitalization Team contacted veterans in the area and the expired and active Headquarters Post membership for their input and assistance in developing or revitalizing the Post?

Three empty rectangular boxes for text entry.

11. Do they have a Post home or meeting place?

Three empty rectangular boxes for text entry.

12. Does the Post have any ceremonial rifles and/or static military equipment? If so, what actions are being taken to secure the rifles?

Three empty rectangular boxes for text entry.

Team / Individual Recommendation:

The Post Development/Revitalization Team is recommending the following action based upon their research and the communities input:

- Revitalize the existing post
- Charter a new post for the area or community
- Merge the existing membership with a newly chartered post
- Recommend cancellation of the post charter with no action to follow
- Merge the membership into an area post or the Headquarters Post, after the NEC has accepted the Departments request for Post cancellation

Please note the teams decision or plan of action by selecting the check box above that applies.

Comments should be provided.

Three empty rectangular boxes for text entry.

Post Development/Revitalization Team member responsible for doing the evaluation:

*** select the applicable check boxes below*

Department Team

Area Team

District Team

Contact Name:

Address:

(include city, state & zip)

Telephone Number:

Four empty rectangular boxes for contact information.

List Team Members & Phone numbers:

Three empty rectangular boxes for text entry.

We certify that the actions above have been completed:

ATTEST:

Empty rectangular box for signature.

Department Commander - signature

Empty rectangular box for signature.

Department Adjutant - signature

Date

Empty rectangular box for date.

Date Format
mm/dd/yyyy

(select date by clicking inside box)