LEC	(Date of Birth)			
		(Phone Number) 264		
(City)		(State)	(Zip)	(Post #)
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I certify that I served at least	one day of active r Il serving honorable service era an U.S. Arn U.S. Nav U.S. Air U.S. Mai U.S. Mai U.S. Coa	ly. nd branch ny vy Force rines	of service be	r 7, 1941 and was

Receipt of Dues		for 20 Post #		ture	t a
	From	\$	Recruiter's Name	Recruiter's Signature	Recruiter's Phone # _

## Mail to:

## American Legion Post 264 PO Box 867, Lincoln, CA 95648

Or bring to a monthly meeting on the 1st Wednesday of the month (@ 7pm) at 541 5th Street, Lincoln, CA.