

## JWV Post Installation Form 1-21-22

- Installations must occur within 60 days of an election. Installation forms must be sent to National Headquarters **annually** within 30 days of installation and no later than June 30.
- Completed forms can be returned to to National Headquarters in the following ways:  
**Mail:** Jewish War Veterans, 1811 R Street, NW, Washington, DC 20009 **Email:** membership@jwv.org • **FAX:** 202-234-5662

Post Name and #: \_\_\_\_\_ Date: \_\_\_\_\_

Post Email Address: \_\_\_\_\_

Post Website: \_\_\_\_\_ Facebook: \_\_\_\_\_

Post Meeting time and location: \_\_\_\_\_

Rosters/Refund checks should be sent to: \_\_\_\_\_

Name of Person filling out this form: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

The following Post Officers were installed on this date: \_\_\_\_\_

By: \_\_\_\_\_  
(Title and Name) (Signature or digital signature)

### -- ★ Elected --

★ CMDR: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Preferred Phone #: \_\_\_\_\_

Email: \_\_\_\_\_

★ SVC: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Preferred Phone #: \_\_\_\_\_

Email: \_\_\_\_\_

★ JVC: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Preferred Phone #: \_\_\_\_\_

Email: \_\_\_\_\_

★ PJA: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Preferred Phone #: \_\_\_\_\_

Email: \_\_\_\_\_

### • Appointed

• QM: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Preferred Phone #: \_\_\_\_\_

Email: \_\_\_\_\_

• Adj: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Preferred Phone #: \_\_\_\_\_

Email: \_\_\_\_\_

- Chaplain

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_

**State:** \_\_\_\_\_ **Zip code:** \_\_\_\_\_

**Preferred Phone #:** \_\_\_\_\_

**Email:** \_\_\_\_\_

- **NMI Representative**

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

City: \_\_\_\_\_

**State:** \_\_\_\_\_ **Zip code:** \_\_\_\_\_

**Preferred Phone #:** \_\_\_\_\_

**Email:** \_\_\_\_\_

- **Other Officers /Chairman**

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

City: \_\_\_\_\_

**State:** \_\_\_\_\_ **Zip code:** \_\_\_\_\_

**Preferred Phone #:** \_\_\_\_\_

**Email:** \_\_\_\_\_

- **Communications/IT Committee Chairman**

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

City: \_\_\_\_\_

**State:** \_\_\_\_\_ **Zip code:** \_\_\_\_\_

**Preferred Phone #:** \_\_\_\_\_

**Email:** \_\_\_\_\_

- **Other Officers /Chairman**

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

City: \_\_\_\_\_

**State:** \_\_\_\_\_ **Zip code:** \_\_\_\_\_

**Preferred Phone #:** \_\_\_\_\_

**Email:** \_\_\_\_\_

- **Other Officers /Chairman**

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_

**State:** \_\_\_\_\_ **Zip code:** \_\_\_\_\_

**Preferred Phone #:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Remarks:**[illegible]