

SONS OF AMVETS
NATIONAL HEADQUARTERS
4647 Forbes Blvd. Lanham, MD 20706
(301) 683-4099 email: natsons@sonsofamvets.org

SONS OF AMVETS VAVS REPRESENTATIVE and/or DEPUTY REPRESENTATIVE

• Recommendation Form •

As Department VAVS Coordinator, I recommend the Sons of AMVETS member(s) listed below be certified as a Sons of AMVETS VAVS Representative to serve an indefinite term at the VA Medical Facility listed below.

Note: Please use a separate form for each medical facility.

Only one (1) Representative and up to three (3) Deputy Representatives may be certified at a facility. Deputies can only be certified at one (1) VA Medical Facility.

VA MEDICAL FACILITY INFORMATION:

Facility Name _____

Address _____

City: _____ State: _____ Zip: _____

Sons of AMVETS Member's Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: Home _____ Cell _____

Email Address: _____

Recommended For: Representative Deputy

Sons of AMVETS Member's Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: Home _____ Cell _____

Email Address: _____

Recommended For: Representative Deputy

Sons of AMVETS Member's Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: Home _____ Cell _____

Email Address: _____

Recommended For: Representative Deputy

Sons of AMVETS Member's Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: Home _____ Cell _____

Email Address: _____

Recommended For: Representative Deputy

VAVS Coordinator's Name (Print): _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: Home _____ Cell _____

Email Address: _____

Date

Signature (Department VAVS Coordinator)

Department

Please submit two (2) copies to Sons of AMVETS National Headquarters