

**VFW DEPARTMENT OF FLORIDA
VISITATION
“WHEN IN COMAND-COMAND”**

***DISTRICT OFFICER'S REPORT OF POST VISITATION** DATE OF VISIT: _____

POST NO: _____ DISTRICT NO: _____ POST MEETING CONDUCTED BY: _____

ARE POST OFFICERS PERFORMING DUTIES AS REQUIRED BY ARTICLE II SECTION 218? _____

IF NO, PLEASE EXPLAIN: _____

WHAT AREAS IF ANY DOES THE POST NEED ASSISTANCE: _____

RECOMMENDATIONS MADE TO POST BY REPRESENTATIVE: _____

GENERAL COMMENTS: _____

*NOTE: ALL POSTS WITHIN THE DISTRICTS TO BE VISITED THREE (3) TIMES BETWEEN **AUGUST AND APRIL** BY ONE OF THE FOLLOWING: DISTRICT COMMANDER, DISTRICT SR. VICE COMMANDER OR DISTRICT JR. VICE COMMANDER TWO **MUST** BE BY THE DISTRICT COMMANDER AT A POST MEETING OR FUNCTION.

PLEASE MAIL REPORTS TO:
DEPARTMENT OF FLORIDA, VFW
543 NE SANCHEZ AVE.

POST COMMANDER'S SIGNATURE

DISTRICT REPRESENTATIVE'S SIGNATURE AND TITLE

OCALA, FL 34470 Or **E-mail** statercp@vfwfl.org OR Fax: 352-622-3869