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(Date)

The American Legion Auxiliary  
National Headquarters  
3450 Founders Road  
Indianapolis, IN 46268  
FAX: 317-569-4502

ATTN: Membership Division

To Whom It May Concern:

The undersigned, a duly authorized officer of \_\_\_\_\_

\_\_\_\_\_ Unit Number \_\_\_\_\_

Department of Florida, does hereby authorize the National Organization of the American Legion Auxiliary to include in its application to the Department of Internal Revenue for group exemption letter so that this Unit may be exempt from the payment of Federal Income Tax under the provisions of Section 501(c) 19 of the Internal Revenue Code of 1954, as amended.

\_\_\_\_\_  
**UNIT EMPLOYER IDENTIFICATION NUMBER**

Sincerely,

\_\_\_\_\_  
Unit President Signature

\_\_\_\_\_  
Unit President Name Printed

\_\_\_\_\_  
Address

\_\_\_\_\_