

VETERANS DAY NATIONAL COMMITTEE

DEPARTMENT OF VETERANS AFFAIRS
OFFICE OF PUBLIC AND INTERGOVERNMENTAL AFFAIRS
ATTN: VETERANS DAY COORDINATOR (002D)
810 VERMONT AVENUE, NW

	WASHING	TON, DC 20			
	ASSOCIATE MEME				
			DATE SUBMITTED)	
1. ORGANIZATION		2. ADDRES	SS (Include City, State and Zi		
3. TELEPHONE NUMBER	4. FAX NUMBER	5. EMAIL A	DDRESS		
6. WEB PAGE ADDRESS		7. CURRE	NT NATIONAL PRESIDING	OFFICER	
8. WHAT IS THE MAIN PURPOSE OF	YOUR ORGANIZATION				
9. WHY DO YOU WISH TO JOIN THE	VETERANO DATINATIONAL COMI	WITTEE (VEINE)			
10. WHAT IS THE SIZE OF YOUR MEMBERSHIP		MEMBI	11. WHAT PERCENTAGE OF YOUR MEMBERSHIP CONSISTS OF VETERANS		
12. MEMBERSHIP QUALIFICATIONS					
	BER OF ACTIVE 15. NUMBER OF ACTIVE CI	OF STATES WIT HAPTERS		ATIONAL BY-LAWS OR A If yes, please attach a copy) NO	
17. DO YOU HAVE AN ANNUAL NATI attach a program from your most rece		please in YES [nclude the last three issues wit	DIC PUBLICATIONS (If yes, th your application)	
19. NAME OF PUBLICATION			20. FREQUENCY OF PUBLICATION	21. DATE OF FIRST ISSUE	

PURPOSES OF PREPARATION, PRESENTATION, AND PROSECUTION OF VETERANS AFFAIRS, AS PROVIDED IN SECTION 5902 (FORMERLY SECTION 540.2 (A) AND (C) OF TITLE 38, CODE OF FEDERAL REGUL.	ON 3402) OF TITLE 38, UNITED STATES CODE (U.S.C.) AND			
IF YES, WHAT IS YOUR CHARTER'S PUBLIC LAW NUMBER	ON WHAT DATE WERE YOU CHARTERED BY CONGRESS			
23. IS YOUR ORGANIZATION CLASSIFIED BY THE INTERNAL REVENUE S (If yes, please include evidence of non-profit status, e.g., letter of determination)	ERVICE AS NON-PROFIT YES NO			
24. IF ACCEPTED AS AN ASSOCIATE MEMBER/MEMBER, WILL YOUR OR VETERANS DAY NATIONAL COMMITTEE ASSOCIATE MEMBER/MEMBER (RESPONSIBILITIES AS DESCRIBED IN THE COMMITTEE'S BY-LAWS				
25. DO YOU HAVE A REPRESENTATIVE WHO WILL ATTEND COMMITTEE WASHINGTON, DC	MEETINGS IN YES NO NO			
REPRESENTATIVE NAME AND ADDRESS	TELEPHONE NUMBER			
	EMAIL ADDRESS			
APPLICANTS SHOULD SUBMIT SUPPORTING DOCUMENTATION TO ENABLE THE COMMITTEE TO MAKE AN INFORMED DECISION				
SIGNATURE (Ink signature)				
TITLE	DATE			
PLEASE SEND THIS APPLICATION VIA EMAIL: vetsday@va.gov				
TEEASE SEND THIS ATTEICATE	ON VIA EMAIL: vetsday@va.gov			
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