Nova Scotia/Nunavut Command
The Royal Canadian Legion

61 Gloria McCluskey Avenue
Dartmouth, Nova Scotia B3B 2Z3

Tel.: 902-429-4090
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ns.legion.ca

All Branch Mail Out # 80

Date: **September 18, 2026**

To:
NS/NU Branches
NS/NU Executive Council
NS/NU Zone Commanders
NS/NU Past Presidents
NS/NU Command Staff

From:
Comrade Carrie Hogan
Executive Director
Nova Scotia/Nunavut Command, RCL

Subject: **Branch Executive Information Sheet**

Message:

Comrades: Please be advised that it is very important that NS/NU Command has up to date contact information on file for Branch Executives. If you have not recently provided NS/NU Command with this information please complete the attached form and email to admin@nsnulegion.ca or mail to 61 Gloria McCluskey Avenue, Dartmouth, NS B3B 2Z3.

Please indicate with an asterisk * email addresses of Executive members that would like to receive All Branch Mail Outs (ABMOs)

NOVA SCOTIA/NUNAVUT COMMAND
BRANCH EXECUTIVE INFORMATION

SECTION 1 – BRANCH INFORMATION

BRANCH NAME:		BRANCH NO.:	DATE (dd/mm/yyyy):
MAILING ADDRESS:		CIVIC ADDRESS:	
PHONE NUMBER:	FAX NUMBER:	EMAIL ADDRESS:	
DAYS/HOURS OF OPERATION:		BRANCH WEBSITE:	

SECTION 2 – BRANCH EXECUTIVE INFORMATION

POSITION	NAME	ADDRESS include Postal Code	PHONE/CELL	EMAIL ADDRESS
PRESIDENT			Tel: Cell:	
IMMEDIATE PAST PRESIDENT			Tel: Cell	
1st VICE PRESIDENT			Tel: Cell:	
2nd VICE PRESIDENT			Tel: Cell:	
3rd VICE PRESIDENT			Tel: Cell:	
SECRETARY			Tel: Cell:	
TREASURER			Tel: Cell:	

POSITION	NAME	ADDRESS include Postal Code	PHONE/CELL	EMAIL ADDRESS
SGT-AT-ARMS			Tel: ..... Cell:	
SERVICE OFFICER			Tel: ..... Cell:	
MEMBERSHIP CHAIR			Tel: ..... Cell:	
POPPY CHAIR			Tel: ..... Cell:	
LEADERSHIP/ DEVT CHAIR			Tel: ..... Cell:	
HONOURS & AWARDS CHAIR			Tel: ..... Cell:	
BY-LAWS CHAIR			Tel: ..... Cell:	
PUBLIC RELATIONS CHAIR			Tel: ..... Cell:	
SPORTS CHAIR			Tel: ..... Cell:	
CHAPLAIN			Tel: Cell:	

SECTION 3 – ELECTION MEETING INFORMATION

DATE OF ELECTION (dd/mm/yyyy):	OFFICER TERM (1 YR / 2 YR):	DATE OF INSTALLATION (dd/mm/yyyy):
DATE OF EXECUTIVE MEETING:	DATE OF GENERAL MEETING:	

SECTION 4 – REQUIRED SIGNATURES UPON COMPLETION OF THIS FORM

BRANCH SECRETARY:	DATE SIGNED: