

STATE CERTIFICATE OF OUTSTANDING SERVICE APPLICATION FORM IN CONFIDENCE

| Sub-Branch: | |
|----------------|--|
| Jub-Dialicli . | |

PLEASE RETURN TO THE RSL-SA STATE BRANCH OFFICE WHEN COMPLETED

CONDITIONS

A State Certificate of Outstanding Service is available for Sub-Branches to present to members, non-members, businesses, local community groups etc. in recognition of their outstanding service to the Sub-Branch, Committee service, support on commemorative days etc.

The certificates are signed by both the State President and the Chief Executive Officer.

Wording usually begins with "In appreciation (or recognition) of" Up to six lines can be included on the certificate, along with the person's name.

APPLICATION

| Name of Recipient (Person or Business/Group) | | |
|---|-----------|--|
| Particulars of services rendered to the League | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| (Please attach additional sheets if required) | | |
| Certificate Wording "In appreciation (or recognition) of | | |
| m approducti (e. reesgimen) ei | | |
| | | |
| | | |
| | | |
| Signed: | Signed: | |
| President | Secretary | |
| Date | Date | |
| FOR OFFICE USE ONLY | | |
| Date of Receipt | | |
| State Certificate Issued | | |