## National Society of the Sons of the American Revolution State Medal of Distinguished Service

(To be prepared and filed with the National Society)

"Tooltips" provide important instructions – Please read them carefully.

| Nomination of:  |                             |                            |                        | SAR Nat #:        |  |  |
|---|-----------------------------|----------------------------|------------------------|-------------------|--|--|
| Mailing Address:  |                             |                            |                        |                   |  |  |
| Mailing Address.  |                             |                            |                        |                   |  |  |
| City:   |                             |                            | State:                 | Zip Code:         |  |  |
|   |                             |                            |                        |                   |  |  |
| State Number:   | Date of Admission:          | Member in Good Standing of | the following Society: |                   |  |  |
|   |                             |                            |                        |                   |  |  |
|   |                             |                            |                        |                   |  |  |
| RECORD OF SERVICE TO THE SOCIETY  |                             |                            |                        |                   |  |  |
| (To be completed by the Society President submitting the nomination)  A. List officer positions held at the Chapter and/or Society level: |                             |                            |                        |                   |  |  |
| A. List officer positions field a   | at the Chapter and/or Socie | ly lever.                  |                        |                   |  |  |
|   |                             |                            |                        |                   |  |  |
|   |                             |                            |                        |                   |  |  |
|   |                             |                            |                        |                   |  |  |
| B. What additional service has this Compatriot performed during your term as President of the Society?                                    |                             |                            |                        |                   |  |  |
|   |                             |                            |                        |                   |  |  |
|   |                             |                            |                        |                   |  |  |
|   |                             |                            |                        |                   |  |  |
|   |                             |                            |                        |                   |  |  |
| C. Record the citation that will be used for the presentation of this medal:  |                             |                            |                        |                   |  |  |
|   |                             |                            |                        |                   |  |  |
|   |                             |                            |                        |                   |  |  |
|   |                             |                            |                        |                   |  |  |
|   |                             |                            |                        |                   |  |  |
| (If addition space is needed, please use additional pages and make sure to send those with this nomination form)                          |                             |                            |                        |                   |  |  |
|   |                             | AUTHORIZATION              |                        |                   |  |  |
| As President of the Society, I affirm that I am allowed to present this medal only  |                             |                            |                        |                   |  |  |
| once during my term of office.  |                             |                            |                        |                   |  |  |
| My term of office is: (Check appropriate choice) one or two years ending in year:   |                             |                            |                        |                   |  |  |
|   |                             |                            |                        |                   |  |  |
| Society President Name: (ple  | ase print) Auth             | orized digital signature:  |                        | Date:             |  |  |
|   |                             |                            |                        |                   |  |  |
| Society President email addre   | Telephone Number:           |                            |                        |                   |  |  |
|   |                             |                            |                        |                   |  |  |
| Society Secretary Name: (ple  | ease print) Auth            | orized digital signature:  |                        | Date:             |  |  |
|   |                             |                            |                        |                   |  |  |
| Society Secretary email addre   | ess:                        |                            |                        | Telephone Number: |  |  |
|   |                             |                            |                        |                   |  |  |

The incumbent Society President may present one medal during his term (or each year of his term if elected to a multiyear term) at the Society's Annual Meeting to a Compatriot in recognition for that Compatriot's conspicuous service to the State Society during the president's administration. The Society President presents this Medal at his discretion; no other approval is required.

| A. |  |  |
|----|--|--|
|    |  |  |
|    |  |  |
|    |  |  |
|    |  |  |
|    |  |  |
|    |  |  |
|    |  |  |
|    |  |  |
|    |  |  |
|    |  |  |
|    |  |  |
|    |  |  |
|    |  |  |
|    |  |  |
|    |  |  |
| В. |  |  |
|    |  |  |
|    |  |  |
|    |  |  |
|    |  |  |
|    |  |  |
|    |  |  |
|    |  |  |
|    |  |  |
|    |  |  |
|    |  |  |
|    |  |  |
|    |  |  |
|    |  |  |
|    |  |  |
|    |  |  |
| C. |  |  |
|    |  |  |
|    |  |  |
|    |  |  |
|    |  |  |
|    |  |  |
|    |  |  |
|    |  |  |
|    |  |  |
|    |  |  |
|    |  |  |
|    |  |  |
|    |  |  |
|    |  |  |
|    |  |  |
|    |  |  |

Nominee's Name: