

**CHERRY RIVER NAVY OF WEST VIRGINIA
RECOMMENDATION FOR COMMISSION**

Date of Recommendation: Click or tap to enter a date.

To: Cherry River Navy
P O Box 85
Richwood, WV 26261-0085'

CANDIDATE'S NAME

Title: (if any) Click or tap here to enter text.

First Name: Click or tap here to enter text.

Middle Name: Click or tap here to enter text.

Last Name: Click or tap here to enter text.

NOMINEE'S MAILING ADDRESS

Address: Click or tap here to enter text.

City: Click or tap here to enter text.

State: Click or tap here to enter text. **Zip Code:** Click or tap here to enter text.

E-Mail Address: Click or tap here to enter text. **Telephone #:** Click or tap here to enter text.

ADMIRAL MAKING RECOMMENDATION

Admiral's Name: Click or tap here to enter text.

Address: Click or tap here to enter text.

City: Click or tap here to enter text. **State:** Click or tap here to enter text.

Zip Code: Click or tap here to enter text. **Year Commissioned:** Click or tap here to enter text.

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***Cherry River Navy
P. O. Box 85
Richwood, WV 26261***