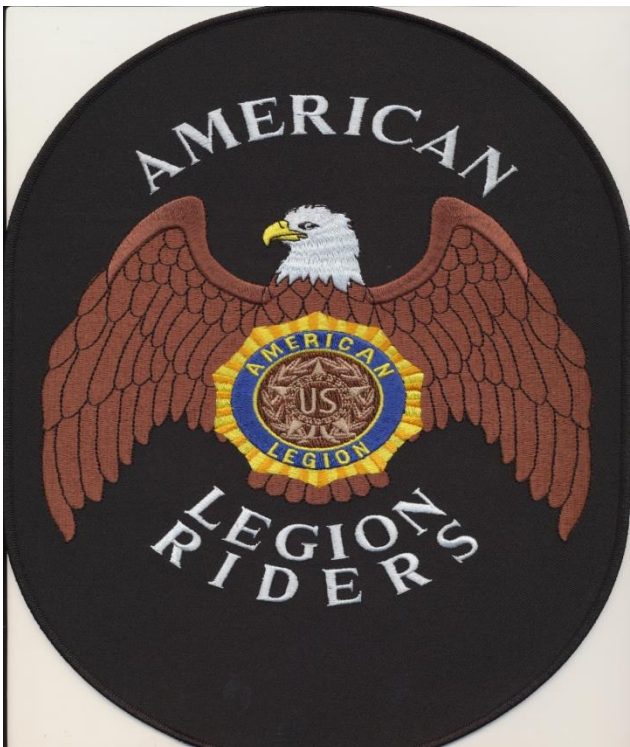


OFFICIAL KANSAS AMERICAN LEGION RIDERS BACK PATCH: The “Official Kansas American Legion Rider Back Patch” is to be a single three line patch containing the National American Legion Rider emblem ordered through Department Headquarters and purchased from American Legion Emblem Sales. **Department Headquarters will provide Posts a form which must be completed and returned for the Department Adjutant’s signature and forwarding to American Legion Emblem Sales.** The 8.5 by 12 inch three line oval back patch may have a black or gold border as provided by American Legion Emblem Sales; add-on borders or other alterations to back patches is prohibited. Line 1 shall display the city/town of the sponsoring Post; Line two shall include the word Post followed by the sponsoring Post’s number; Line three shall be Kansas Chapter.



Chapter Number _____
City _____
Department Approval _____
Date _____

Department Headquarters

Phone: 785-232-9315
 Fax: 785-232-1399
 Mail: A.L. Department of Kansas
 Attn: Adjutant
 1314 SW Topeka Blvd.
 Topeka, KS 66612-1886

Enclose Payment With Order.
 No C.O.D.'s or Open Accounts.
 Make Checks Payable To:
American Legion Emblem Sales

(Prices Effective Through 11/15/2018)

Product #	Description	Unit Price	Quantity	Subtotal
720.407X	3-line back patch	\$39.95/ea		
Spec Order	3-line back patch w/gold border	\$39.95/ea		
<div style="border: 2px solid green; padding: 5px;"> **NOTE**Patches will have black border unless special ordered with gold border </div>				Shipping & Handling (refer to box at left)
				Total

Shipping & Handling

Up to \$5	Add \$2.95	\$100.01 - 150.00...	Add \$15.95
\$5.01-10.00.....	Add \$3.95	\$150.01 - 200.00...	Add \$21.95
\$10.01-20.00.....	Add \$5.95	\$200.01 - 300.00...	Add \$24.95
\$20.01-30.00.....	Add \$7.95	\$300.01 - 500.00...	Add \$33.95
\$30.01-50.00	Add \$8.95	\$500.01 & Over	Add \$39.95
\$50.01 to \$100.00....	Add \$9.95		

VISA MASTER CARD Check or Money Order
 AMEX DISCOVER

Account#

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Expires ___/___/___
 CVV _____

Signature _____

SOLD TO:

NAME _____
 STREET _____
 CITY _____
 STATE _____ ZIP _____
 DAYTIME PHONE () _____

SHIP TO: (if different)

NAME _____
 STREET _____
 CITY _____
 STATE _____ ZIP _____
 DAYTIME PHONE () _____