American Legion Auxiliary Department of WI / PO Box 140 Portage WI 53901

Questions? Please contact us at (toll free) 866-664-3863 / 608-745-0124

2013 / 2014 / 2015 / 2016/ 2017

MEMBERSHIP TRANSMITTAL FORM

Please duplicate this form for future use, also available online at www.amlegionauxwi.org

Keep a copy of completed Transmittal Form for your records

Unit City Location_____ Unit #_____

Date_____ Dist #_____

This is a pay dues form. LIST ONLY THE MEMBERS YOU ARE PAYING FOR. DO NOT list Deceased, PUFL's, or PAID transfers

INSTRUCTIONS:

- Names must be listed in ALPHABETICAL order by last name. A Member ID# is required for everyone. Leave new members ID #'s BLANK.
- A Date of Birth is **REQUIRED** FOR EVERY JUNIOR. DO NOT LIST SR DOB'S. **For 2017 all members born in 1998 ARE SENIORS.** Members born in **1999 ARE JUNIORS.**
- New Members **MUST HAVE** a ***COMPLETED*** New Member Application enclosed with a **LEGION POST** OFFICER SIGNATURE. **Incomplete applications cannot be processed and will be returned.**

➡ CIRCLE YEAR TO BE PAID 2013 2014 2015 2016 2017 *Only 1 year allowed per form*

(A PAST DUES Transmittal form MUST be used for any year prior to 2013)

DO NOT ALTER THE AMOUNTS. Department collects $20/Sr and $3/Jr

Total *SENIORS* listed _____ X $20.00 $_____

Total *JUNIORS* listed _____ X $3.00 $_____

Credit Slips **ENCLOSED** **SUBTRACT** $_____

Total Sr & Jr names listed _____ Check Total $_____

Enclosed is check #_____ Enclose a separate check for each transmittal.

A 25.00 charge will be issued for any bank returned checks.

Make check payable to: ALA Dept. of WI Mail to: ALA Dept. of WI, PO Box 140, Portage WI 53901

Person completing the Unit Membership Transmittal Form_____

Address/City/Zip_____

Phone # _____ Work/Cell # _____ E-Mail_____

INSTRUCTIONS:

1) List ALL members you are paying for **ALPHABETICALLY** by last name on this sheet
2) List only the members you are paying for – **DO NOT LIST PUFL's, Deceased or Paid Up Transfers!**
3) List ALL ID#'s (except new members – leave ID # blank)
4) **REQUIRED ALL Junior DOB's MUST BE listed.** Members born in **1998** are **Seniors**. **1999** DOB's are **Juniors.**

MEMBER ID #	NAME	SR.	JR.	JR. DOB	NEW	TRANSFER
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Total Sr's this page_____ **Total Jr's this page_____**