

American Legion Auxiliary Department of South Carolina Membership Transmittal Form

UNI	IT #	DATE	Senior Member Name	Junior Member Name
	ANSMITTAL # FOR			
	Dues are transmitted herewith for the follow	, , ,		
	SENIORS @	EACH \$		
	JUNIORS @	EACH \$		
	TOTAL MEMBER	S TRANSMITTED TODAY		
	Total Members Tra	nsmitted this Year		
	PAYM	MENT ENCLOSED \$		
		Check No		
1)	Please use this form when transmitting mer	nbership dues.		-
2)	List the names of all the members you are to form (use back if needed) by Junior and Second point send in non-renewals, they are automated Send all deceased cards with member data	nior and keep a copy for your records. tically purged after 18 months of inactivity.		
3)	Complete a SEPARATE transmittal form for ear your record keeping easier, number each tran each membership year.			
4)	If forms are not complete and money is not combe returned to Unit.	rect it will not be processed and will	Transfer Member Name	New Member Name
Tra	ansmittals with payment are to be sent to:	American Legion Auxiliary 6326 St. Andrews Road Columbia, SC 29212		
Na	ame and Address of person submitting the	membership:		
Na	ame			
Ad	idress			
Cit	ty, State, Zip			
Te	lephone/E-mail			



Senior Member Name	Junior Member Name	New Member Name	Transfer Member Name