

Membership Transmittal Form

ENCLOSE CHECK FOR MEMBERSHIP DUES ONLY

Date _____



Department Dues \$6.00
National Dues \$2.00
 \$8.00

_____ Members @ \$8.00 = \$ _____

TOTAL \$ _____

Enclosed is check no. _____ for \$ _____ In payment of dues

Squadron No. _____ Of _____ by _____

Address, Town & Zip Code _____

Phone No. (_____) _____

Make checks payable to:

**Iowa Department, The American Legion
720 Lyon St., Des Moines, IA 50309-5481**

All dues subject to change when so authorized by Department or National Convention Mandates.

IF THIS IS YOUR LAST TRANSMITTAL FORM, PLEASE CHECK HERE

NOTE: DO NOT include other charges such as Boys State fees, supplies, freight charges, etc., in check for membership dues.

Send: WHITE Copy to Iowa Department - CANARY for your records

(5/10)