

## Sons Membership Transmittal Form

To: American Legion  
 P.O. Box 1069  
 Montgomery, AL 36101

From: \_\_\_\_\_ (Fill out Completely)  
 \_\_\_\_\_  
 \_\_\_\_\_

Transmittal Number: \_\_\_\_\_ Date: \_\_\_\_\_

**Only those paying members will be included in your totals on the Membership Report.**

_____	Paid Renewals	@	\$10.00	=	\$	_____
_____	Paid Transfers	@	\$10.00	=	\$	_____
	<b>Need Membership Card and MDF before we can process</b>					
_____	Paid New Members	@	\$10.00	=	\$	_____
_____	Non-Paying Transfers	@	\$00.00	=	\$	NONE
	<b>We need just the MDF on this member to process</b>					
_____	Total Enclosed				\$	_____

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### For Office Use Only

<b>Total Renewals</b>	_____	<b>Renewals to Date</b>	_____
<b>Total New Members</b>	_____	<b>Total New to Date</b>	_____
<b>Total Renewing Transfers</b>	_____	<b>Total Renewing to Date</b>	_____
<b>Total Nonpaying Transfers</b>	_____	<b>Total Nonpaying to Date</b>	_____

Verified: \_\_\_\_\_ Date: \_\_\_\_\_