AMERICAN LEGION AUXILIARY, DEPARTMENT OF KANSAS
MEMBERSHIP TRANSMITTAL FORM EFFECTIVE JULY 1, 2023

DATE: _____

UNIT #_____

NAME: _____

DISTRICT: _____

CITY: _____

YOUR TRANSMITTAL #: _____

TRANSFERS: _____

CHECK #: _____

REPORT SUMMARY			
TYPE	QTY	RATE	AMT. PD
SENIOR (NEW-CURRENT)		$28.00	$
PRIOR		$20.50	$
PUFL		NONE	$0.00
JUNIOR (NEW-CURRENT)		$3.75	$
JR. PRIOR		$3.75	$
SUBTOTAL			$
ENTER CREDIT HERE			$
TOTALS			$

Complete information below for each member – attach additional pages as needed

	MEMBERS		SENIORS				JUNIORS		
	NAME (LAST, FIRST, MI (ALPHABETICAL PLEASE)	MEMBERSHIP #	NEW	CURRENT	PRIOR YEAR	PUFL	NEW	RENEWAL	DATE OF BIRTH
1									
2									
3									
4									
5									
6									
7									
8									
9									
10									

Has any of the membership information already been entered online?   ☐ **YES (Explain**   ☐ **NO**

CONTACT PERSON: _____   HOME PHONE: _____

ADDRESS: _____   CELL PHONE: _____

CITY, STATE, ZIP _____   EMAIL: _____

INSTRUCTIONS:

1. **MAKE SURE TO SEND COPY OF APPLICATION VERIFIED FOR ELIGIBILITY BY POST FOR ALL NEW MEMBERS.**
2. **JUNIOR APPLICATIONS MUST HAVE A DATE OF BIRTH LISTED.**
3. **PUFL (VIM) APPLICATIONS ARE SENT TO NATIONAL HEADQUARTERS.**
4. **PLEASE PUT ALL PUFL (VIM'S) ON THE FIRST PAGE OF THE TRANSMITTAL FORM.**
5. **PLEASE PRINT ALL NAMES IN ALPHABETICAL ORDER BY LAST NAME ON ALL TRANSMITTAL FORMS & SEND TO:**

> **AMERICAN LEGION AUXILIARY DEPARTMENT OF KANSAS**
> **1314B SOUTH TOPEKA BLVD**
> **TOPEKA KS 66612-1817**
> **(785-232-1396)**

	NAME (LAST, FIRST, MI (ALPHABETICAL PLEASE)	MEMBERSHIP #	NEW	CURRENT	PRIOR YEAR	PUFL	NEW	RENEWAL	DATE OF BIRTH
		SENIORS					JUNIORS		
11									
12									
13									
14									
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19									
20									
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