AMERICAN LEGION AUXILIARY

Department of North Carolina

MEMBERSHIP TRANSMITTAL

Mail to: P.O. Box 46315, Raleigh, NC 27620
Email: ncalahq@nclegion.org

Unit # _____
Date _____
Transmittal #_____

Person completing
form/Phone/Email _____

Total Jr's. Paid _____ x $8.50 = _____ TOTAL Members Paid # _____

Total Sr's. Paid _____ x $31.00 = _____ TOTAL $_____ Check # _____

*****PLEASE LIST LAST NAMES IN ALPHABETICAL ORDER *****

	ALA ID NUMBER	LAST	FIRST	JR	SR	PUFL	BACK DUES
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