

**TRANSMITTAL OF DEPARTMENT MEMBERSHIP CARDS**

<p><b>TO: The American Legion</b>  <b>Department of Texas</b>  <b>PO Box 140527</b>  <b>Austin, TX. 78714</b></p> <p><b>FROM</b></p> <p>_____</p> <p align="center"><b>Post Name &amp; No.</b> _____ <b>District</b> _____</p> <p>Membership Year _____</p> <p>Check/MO No. _____ for \$ _____</p> <p align="center"><b>\$31.00</b> per member</p> <p>Make Check payable to  <u>The American Legion, Department of Texas</u>          *****</p> <p align="center"><b>MAKE SEPARATE CHECKS FOR REGULAR MEMBERSHIP AND PUFL MEMBERSHIP AND DIFFERENT MEMBERSHIP YEAR</b></p>	<p>TRANSMITTAL NO _____</p> <p>TOTAL CARD THIS TRANSMITTAL _____</p> <p>TOTAL CARDS PRIOR TRANSMITTALS _____</p> <p>TOTAL CARDS TRANSMITTED TO DATE _____</p> <p><b><u>THIS TRANSMITTAL PREPARED BY:</u></b></p> <p>Name _____</p> <p>Date _____</p> <p>Address _____</p> <p>City / Zip _____</p> <p>Daytime Phone _____</p> <p>Email _____</p> <p align="center">*****</p> <p align="center">DO NOT ROLL, FOLD OR MUTILATE CARDS – SEND FLAT</p> <p align="center"><b>ENCLOSE CARD SECTIONS #1 &amp; #2</b> <b>DO NOT SEPARATE</b></p>
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Membership Number ( 9 digits)	Member Name	Membership Number ( 9 digits)	Member Name

**DO NOT REQUEST SUPPLIES ON THIS FORM**

<b>DEPARTMENT USE ONLY – DO NOT WRITE IN THIS SPACE</b>			
# Cards Received _____		Post Credit _____	
Post Members to Date _____		Amount Due _____	