

2019 UNIT DUES FORM

Forms not legible will be returned

I understand that the dues amount listed below will be printed on the upcoming Membership Renewal Notices that will be mailed to each Senior member of our Unit. Below is the address to be printed on each Renewal Notice showing where our members are to mail their dues for this Unit.

It is understood that no change in the amount of dues or the address to which the dues are to be sent can be made after a deadline which Department Headquarters will establish based on the requirements of National Headquarters.

DEPARTMENT OF MINNESOTA

UNIT NUMBER _____

UNIT LOCATION _____

2018 SENIOR DUES OF THE UNIT ARE \$ _____
(Amount **each Senior** member pays to your Unit)

2018 JUNIOR DUES OF THE UNIT ARE \$ _____
(Amount **each Junior** member pays to your Unit)

Name of individual in the Unit to receive membership dues

Address (Please be certain it is the current/correct address)

Check Box if this is the
Legion Post address.

City State Zip Code

(_____) _____
Area Code Telephone Number E-mail address

Date

Signature

Title

EVERY UNIT MUST COMPLETE & RETURN
THIS COMPLETED FORM TO SANDIE DEUTSCH, DEPT. SECRETARY

Return no later than **March 15, 2018** to:

American Legion Auxiliary
State Veterans Service Building
20 W 12th St Room 314
St Paul MN 55155

Forms are also on our website and completed forms may be emailed to deptoffice@mnala.org.