TRANSMITTAL OF DEPARTMENT MEMBERSHIP CARDS

To: The American Legion Department of Texas PO Box 140527 Austin, TX 78714 From: Post Name & No. District Membership Year Check/MO No for \$ \$26.00 per member Make check payable to:		Transmittal No Total Card This Transmittal Total Cards Prior Transmittals Total Cards Transmitted to Date This Transmittal Prepared by: Name Date Address City/Zip Phone E-mail	
The American Legion, Department of Texas Make separate checks for regular membership and PUFL membership and different membership year		Do not roll, fold or mutilate cards—send flat Enclose card sections #1 & #2. Do Not Separate.	
Membership Number (9 digits)	Member Name	Membership Number (9 digits)	Member Name
DO NOT REQUEST SUPPLIES ON THIS FORM			
Department Use Only—Do Not Write In This Space			
# Cards Received		Post Credit	
Post Members to Date		Amount Due	