

This form is available on line
www.amlegionauxwi.org

Unit city location _____ Unit # _____

Date _____ Dist # _____

PAYMENT INSTRUCTIONS

This form is to be used only if you don't have the *General Fund* or *Poppy Fund* donation sheet. Only the programs listed on those forms, we will accept donations for.

Check # _____ Check amount \$ _____

Program/Purpose _____

Contact Person/Title _____

Address _____

City/State/Zip _____

Daytime phone # w/area code _____ Email _____

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