

American Legion Auxiliary Department of WI / PO Box 140 Portage WI 53901
Questions? Please contact us at 608-745-0124 / alawi@amlegionauxwi.org

2019 - 2023 MEMBERS' DUES PAYMENT FORM

Keep a copy of this form for your records

Unit City Location _____ Unit # _____

Date _____ Dist # _____

INSTRUCTIONS

- THIS FORM IS ONLY FOR MEMBERS YOU ARE SENDING MONEY FOR.** Do not list members that have paid online, directly to HQ, PUFL's, deceased, or PAID transfers.
- Names must be listed in ALPHABETICAL order by last name. Do not separate new or junior members.
 - Several pages may be used if necessary. Word and Excel pages with the required information stapled to this cover sheet are also acceptable.
- A Member ID# is required for everyone. *(leave new member ID #'s blank)*
- A Date of Birth is REQUIRED FOR EVERY JUNIOR. Do not list Sr. DOB's.
For **2023** all members born in **2004 ARE SENIORS**. Members born in **2005 ARE JUNIORS**.
Dues for juniors are based on their birth year, not the actual date they turn 18.
Members 18 years of age as of 01/01/23 will owe senior dues YOB (2004) / Members 17 years of age as of 01/01/23 will owe junior dues YOB (2005)
- New Members **MUST HAVE** a COMPLETED New Member Application enclosed.

INCOMPLETE APPLICATIONS CANNOT BE PROCESSED AND WILL BE RETURNED.

PLEASE CHECK WHICH MEMBERSHIP CARD YEAR TO BE PAID

Each YEAR needs to be listed on a separate payment form.

All years prior to 2019 must be submitted on a Past Dues form.

2019 2020 2021 2022 2023

DO NOT ALTER THE AMOUNTS. Department collects \$28/Sr and \$5.25/Jr

Total *SENIORS* listed _____ X \$28.00 \$ _____

Total *JUNIORS* listed _____ X \$5.25 \$ _____

Total number of names listed _____ Check Total \$ _____

Enclosed is check # _____ Enclose a separate check for each transmittal.

A 25.00 charge will be issued for any bank returned checks.

Make check payable to: ALA Dept. of WI

Mail to: ALA Dept. of WI, PO Box 140, Portage WI 53901

Person completing the Unit Membership Transmittal Form _____

Address/City/Zip _____

Daytime Phone # _____ E-Mail _____

Department Use Only \$ _____ (#4550)

INSTRUCTIONS

- 1) List **ALL** members you want paid, **INCLUDING NEW**– DO NOT LIST PUFL's, Deceased or PAID members!
- 2) List ALL members **ALPHABETICALLY** by last name on this sheet. Use multiple pages if paying for more than 30.
Do not separate new or juniors.
- 3) A **Member ID#** is required for everyone. (except new members – leave their ID # **BLANK**)
- 4) REQUIRED ALL Junior DOB's MUST BE listed. **Members born in 2004 are Seniors.** **Members born in 2005 are Juniors.** *The dues amount owed is NOT based on the actual date they turn 18.*

MEMBER ID # <small>(if new, leave blank)</small>	NAME <small>list in alphabetical order by last name DO NOT SEPARATE new or juniors</small>	SR.	JR.	JR. DOB REQUIRED	NEW	TRANSFER
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						
11.						
12.						
13.						
14.						
15.						
16.						
17.						
18.						
19.						
20.						
21.						
22.						
23.						
24.						
25.						
26.						
27.						
28.						
29.						
30.						

Total Sr's this page _____

Total Jr's this page _____