

**AMERICAN LEGION AUXILIARY, DEPARTMENT OF NEW YORK**  
**MEMBERSHIP TRANSMITTAL FORM FOR THE 2023-2024 YEAR**

Date:	Report Summary				FOR OFFICE USE ONLY
	Type	Qty.	PER CAPITA	AMOUNT PAID	RECEIVED:
Unit #:	<b>Senior:</b>				Name:
County:	2024 DUES (RENEWAL OR NEW/REJOIN)		\$28.00	\$	
Transmittal No.:	2023 AND ALL PRIOR YEARS		\$20.00	\$	Date
Transfer w/ Dues:	Junior		\$ 6.25	\$	
Transfer w/o Dues:	ENTER CREDIT OR SHORT HERE =>			\$	Transaction #
Check # and/or Credit Date:	TOTAL OWED TO DEPARTMENT:			\$	

**Make ONE check per transmittal- payable to ALA, Dept. of NY, Inc. and mail to the Department Office:  
ALA, Dept. of NY; 1580 Columbia Turnpike, Bldg. #1, Suite 3; Castleton-On-Hudson, NY 12033  
--COMPLETE INFORMATION BELOW FOR EACH MEMBER, ATTACH ADDITIONAL PAGES AS NEEDED--**

MEMBERS		SENIORS			JUNIORS	
FULL NAME (LAST, FIRST) (ALPHABETICAL)	MEMBER NO. (LEAVE BLANK FOR NEW MEMBERS ONLY)	2024 RENEWAL	WRITE THE WORD NEW/REJOIN	2023 & PRIOR YEARS	2024 DUES	PRIOR YEARS
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NAME: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

Phone: (\_\_\_\_\_) \_\_\_\_\_  
Cell phone: (\_\_\_\_\_) \_\_\_\_\_  
Email: \_\_\_\_\_

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MEMBERS		SENIORS			JUNIORS	
FULL NAME (LAST, FIRST) (ALPHABETICAL)	MEMBER NO. (LEAVE BLANK FOR NEW MEMBERS ONLY)	2024 RENEWAL	WRITE THE WORD NEW/REJOIN	2023 & PRIOR YEARS	2024 DUES	PRIOR YEARS
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